Award Number: W81XWH-09-1-0535

TITLE: Enhancing BATTLEMIND: Preventing PTSD by Coping with Intrusive Thoughts

PRINCIPAL INVESTIGATOR: Jillian Shipherd, Ph.D.

CONTRACTING ORGANIZATION:
Boston VA Research Institute, Inc.
150 S. Huntington Ave.
Boston, MA 02130-4817

REPORT DATE:
May 2013

TYPE OF REPORT:
Annual

PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: Approved for Public Release;
Distribution Unlimited

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.
Enhancing BATTLEMIND: Preventing PTSD by Coping With Intrusive Thoughts

Jillian C. Shipherd, Ph.D.
E-Mail: jillian.shipherd@va.gov

Boston VA Research Institute, Inc.
Boston, MA 02130-4817

U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

Approved for Public Release; Distribution Unlimited

Over the course of the award period, we implemented a variety of recruitment techniques to rapidly boost interest in the study, and were able to make excellent progress with enrolling recently returned Soldiers. As a result of our aggressive recruitment techniques, ongoing positive relationships with Ft. Drum personnel, and frequent travel to Ft. Drum for implementation of study groups, we have come very close to our target enrollment of 1,600 Soldiers (a total of 1,442 enrolled participants at the close of this Award Period). Preliminary quantitative data analyses on Phase 2 data for 1,197 participants has shown support for the RESET training, and all trainings continue to be well received by participants. We are pleased to have been granted a one year extension to complete data collection and data analyses. We are behind in meeting data related milestones as the project sample has doubled in size, and we are currently understaffed. We remain optimistic that there will be additional funding granted to support the hiring of personnel to support the completion of these milestones. In Year 4 we will continue recruitment and enrollment of Phase 2 participants until the sample is reasonably complete. We then anticipate beginning quantitative data analysis.

Post-deployment mental health training

<table>
<thead>
<tr>
<th>Security Classification of:</th>
<th>Limitation of Abstract</th>
<th>Number of Pages</th>
<th>Responsible Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>U</td>
<td>U</td>
<td>U</td>
<td>USAMRMC</td>
</tr>
</tbody>
</table>
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Body</td>
<td>4</td>
</tr>
<tr>
<td>Key Research Accomplishments</td>
<td>13</td>
</tr>
<tr>
<td>Reportable Outcomes</td>
<td>13</td>
</tr>
<tr>
<td>Conclusion</td>
<td>13</td>
</tr>
<tr>
<td>References</td>
<td>13</td>
</tr>
<tr>
<td>Appendices</td>
<td>13</td>
</tr>
</tbody>
</table>
Introduction

Mandated post-deployment training currently instructs troops on maximizing mental health related to deployment. However, a critical element of successful adjustment is developing adaptive strategies for dealing with intrusive deployment-related thoughts. Intrusive thoughts are a common and upsetting symptom following deployment that are central to posttraumatic stress disorder (PTSD) and have historically been left unaddressed in post-deployment training. This project tests a new post-deployment module that translates evidence-based therapeutic strategies into a resilience-based training module (RESET). RESET specifically educates troops about intrusive thoughts and teaches adaptive skills for long-term coping with the thoughts. This is a two-phase project which tests an enhancement to mandated post-deployment training. Phase 1, which is complete, included the refinement of the training content of RESET and comparison condition CONTROL (short-term coping strategies). This was achieved with the investigation team and in focus groups with the target audience. Phase 2 (currently in progress) is assessing the immediate and short term effectiveness of RESET, CONTROL, and Psychoeducation about Intrusive Thoughts (PIT) as additional post-deployment modules. This is being tested in a controlled trial with 4 conditions: RESET, CONTROL, PIT and Training as Usual (TAU).

Body

This report details activities for this project during the time period of April 27, 2012—April 26, 2013 (Award period 3). In January 2012, we were able to resume study recruitment following an 8 month delay (detailed in our 2011 Annual Report), and immediately began implementation of study groups. Despite a high degree of success with recruitment and enrollment, it was clear that due to the extended delay, we would be unable to meet all milestones for the project as outlined in the SOW. Thus in November, 2012 we submitted a request for a one year extension as well as a revised SOW projecting the timeline for completion of all original project milestones. We were very pleased that this one year extension was approved. As a result, we have been able to complete nearly all milestones outlined in the revised SOW associated with recruitment, enrollment, and data collection (see detailed information by quarters, below).

Over this award period, we have also continued to implement cost-saving measures when feasible; during Months 1-6 of this Award Period, the Project Coordinator’s (PC) salary continued to be paid via an Interagency Personnel Agreement (IPA). Beginning in Month 7, the PC’s salary transitioned back to this award. Despite our ongoing cost-saving measures, it became clear that additional funding would be necessary to support the completion of milestones related to data management and analyses. Specifically, we submitted a request (also in November, 2012) for additional funds to support the hiring of a statistical expert and a part-time research technician. These additional staff would be able to support more complex analyses of the data which include both quantitative and qualitative data in a sample that has doubled in size since the original contract (a total of 1,600 Soldiers rather than the original 800 Soldiers). Thus, more in depth investigation of the benefits of training could occur (e.g., who benefits most from each type of training based on combat exposure, MOS, rank, etc.) with the addition of appropriate staff. At the time of submission of this report, this request continues to
be under review. In our quarterly breakdown below, we detail the impact that this has had on meeting current and upcoming data-related milestones in the SOW.

Over this Award period, we have not had any changes to personnel, other than that effective 5/29/12, Nicole Delgado, M.A. transitioned from half-time to full time on this project and was certified to deliver all three training modules (PIT, RESET, and CONTROL).

The quarterly milestones discussed below reflect the current SOW (included with this submission). For ease of reference and clarity, each task outlined in the Statement of Work will be discussed in chronological order.

**Award Period 3, Months 1-3**

- **Recruitment of 3rd BCT begins**

**PROGRESS:** Recruitment of the 3rd BCT began during this quarter and was primarily coordinated through Ms. Joan Marks, SRC Chief at Ft. Drum. IRB-approved briefings were given by study staff at the PDHRA process for 3rd BCT Soldiers. This recruitment methodology continues to be successful, with approximately 50% of Soldiers completing the PDHRA process expressing interest in the study. As of the close of this quarter, we have a total of 1,251 Soldiers who have expressed interest in the study since recruitment was resumed.

- **RESET, CONTROL, PIT and TAU provided to already recruited participants, pre and post data gathered, and delivery of RESET, CONTROL, PIT and TAU to 3rd BCT participants begins, pre and post data gathered**

**PROGRESS:** Randomization of already recruited Soldiers as well as of newly recruited 3rd BCT Soldiers to the RESET, CONTROL, PIT, and TAU conditions continued. At the close of the quarter, 609 consented Soldiers had been randomized to one of the four conditions (an increase of 74 since last quarter), even with both block leave and field training occurring for many Soldiers during this quarter. Specifically, a total of 156 participants have been randomized to the TAU condition; 155 to the PIT condition; 143 to the CONTROL condition, and 155 to the RESET condition. The group-based trainings during this quarter were delivered via three Phase 2 sessions with delivery of all content by one of two certified trainers (Dr. Joanne Fordiani or Nicole Delgado, M.A.). All live trainings during this quarter were observed by the PI to assure appropriate administration of trainings and all other procedures. Baseline, pre-training, and post-training data were gathered from participants at these group sessions.

- **1 month follow-up data collection continues for already recruited participants, begins for 3rd BCT**

**PROGRESS:** Follow up questionnaires were sent to participants who enrolled through the month of June, 2012 (609 participants). We had received a total of 234 completed follow-up questionnaires at the end of this quarter. As per study procedures, reminder phone were made by study staff to participants whose follow-up data were overdue for return.
• **Scanning of collected data continues for already recruited participants, begins for 3rd BCT**

**PROGRESS:** Scanning of data from the initial sample of 800 participants continued, and scanning of 3rd BCT data began. Negotiations for the printing, binding, and shipping of workbooks for 800 additional participants by Camber Corporation were completed and this contract was finalized. The new baseline questionnaire workbooks were delivered on July 3rd, 2012.

• **Continued recruitment efforts**

In addition to recruitment efforts at PDHRA as described above, study staff continued to implement additional recruitment tactics in order to reach potential participants. Specifically, we continued to implement previously-described recruitment efforts and in addition, we added new strategies. Strategies (ongoing and new) implemented during this quarter included:

1. Continued coordination with Dr. Benham to post flyers in the Behavioral Health Clinic and Conner Troop Medical Clinic.
2. Networking and coordination with the Family Readiness Program Manager and the Family Readiness Support Assistants from the 10th CAB, 3rd BCT, and HHBN.
3. Attendance at Mountainfest. Via continued networking with Donna Orvis, Chief of Marketing for Ft. Drum, we were offered the opportunity for study personnel to have a staffed table at Mountainfest, an annual celebratory event held at Ft. Drum. This event is open to the entire Ft. Drum community and the general public. Study personnel staffed a table and made available currently approved sign-up sheets for interested Soldiers to provide their name and a contact phone number if they wanted additional information about the study. A total of 18 Soldiers expressed interest in the study via Mountainfest efforts. Study staff also conducted a raffle for three $50 gift cards which was open to all Mountainfest attendees regardless of study eligibility.

• **Additional activities**

1. On July 10th, 2012, a VA Boston Healthcare System Informed Consent (ICF) Audit was performed on the informed consent documentation for all 609 participants that had been consented into this study. We are pleased that the Research Compliance Officer found that all ICF documentation was complete, well organized, and securely maintained.

2. The following VHABHS IRB activity took place during this quarter:

   (a) An amendment requesting approval to offer the ability to view (in person) trainings received by participants in alternate study groups (e.g. a TAU participant who would like to view PIT and RESET) was reviewed and approved on April 30th, 2012.

   (b) On May 5th, 2012 an amendment was submitted requesting approval to 1) conduct a raffle open to all attendees at Mountainfest, an annual summer celebration open to
the Ft. Drum community and the general public (see above, Continued Recruitment Efforts, point three) and 2) distribute at Mountainfest wallet-sized versions of our currently-approved recruitment cards with a tip calculator on the back. This amendment was approved on May 21, 2012.

(c) On May 10th, 2012 an amendment was submitted seeking approval to produce a banner to be displayed at Mountainfest (see description above). This amendment was approved on June 4th, 2012.

(d) On July 10th, 2012 an amendment was submitted requesting the addition of Brian Smith, Ph.D. to this study protocol. Dr. Smith is data manager for the National Center for PTSD (NCPTSD) Women’s Health Sciences Division (which the P.I. is a part of) and thus he is added to all active research initiatives within the division.

(e) On July 12th, 2012 an amendment was submitted seeking approval to add additional procedures for participants to return their mailed one month follow-up questionnaires to study staff (a secure drop box at the Soldier Readiness Clinic at Ft. Drum) in order to increase return rate of follow up packets. This amendment was approved on July 23rd, 2012.

**Award Period 3, Months 4-6**

- **RESET, CONTROL, PIT and TAU provided to 3rd BCT participants, pre and post data gathered**

**PROGRESS:** Randomization of recruited 3rd BCT Soldiers to the RESET, CONTROL, PIT, and TAU conditions continued. At the close of this quarter, a total of 1,109 consented Soldiers had been randomized to one of the four conditions (an increase of 500 since last quarter). This was significant, given that many returning Soldiers left the Ft. Drum area due to PCS orders and/or ETS'ing. Additionally, Soldiers remaining in the area continued to have variable training schedules. Specifically, a total of 281 participants have been randomized to the TAU condition; 276 to the PIT condition; 273 to the CONTROL condition, and 279 to the RESET condition. The 30 group-based trainings during this quarter were delivered via Phase 2 sessions with delivery of all content by one of two certified trainers (Dr. Joanne Fordiani or Nicole Delgado, M.A.). Baseline, pre-training, and post-training data were gathered from participants at these group sessions.

- **1 month follow-up data collection continues**

**PROGRESS:** Follow up questionnaires were sent to participants who completed the in-person baseline visit and were enrolled through the month of September, 2012 (957 participants). At the close of this quarter, we had received a total of 356 completed follow-up questionnaires. As per study procedures, reminder phone calls continued to be made by study staff to participants whose follow-up data were overdue for return.
• **Continued recruitment efforts**

PROGRESS: Recruitment of the 3\textsuperscript{rd} BCT continued. As previously described, efforts continued to be primarily coordinated through Ms. Joan Marks, SRC Chief at Ft. Drum. IRB-approved briefings were given by study staff at the PDHRA process for 3\textsuperscript{rd} BCT Soldiers. This recruitment methodology continued to be successful, with approximately 50% of Soldiers completing the PDHRA process expressing interest in the study. As of the close of this quarter, we had a total of 2,248 Soldiers who expressed interest in the study. In addition to recruitment efforts at PDHRA, study staff continued to implement a variety of recruitment tactics to stimulate interest and increase study enrollment. Strategies implemented during this quarter included:

1. Continued coordination with the Chief of Behavioral Health (Dr. Benham) to post flyers in the Behavioral Health Clinic.
2. Networking and coordination with the following Ft. Drum staff to distribute our materials, make announcements to Soldiers, etc.:
   a. Family Readiness Support Assistant from the 3\textsuperscript{rd} BCT
   b. Ft. Drum Health Promotion Officer
   c. Ft. Drum Director of Marketing
   d. Director of Army Community Services
   e. Representatives from Military Family Life Consultants
   f. Public Affairs Officer
   g. Ft. Drum newspaper (Mountaineer) editor
   h. Ft. Drum Facebook page manager

• **Scanning of collected data continues**

PROGRESS: Scanning of all baseline data from the initial sample of 800 participants was completed. Scanning of follow up data for the initial sample continued as follow up packets for this cohort were returned to the research team. Scanning of 3\textsuperscript{rd} BCT data (both baseline and follow up) continues.

• **Additional Activities**

1. On September 26, 2012 an amendment was submitted requesting the addition of Alexis Matza, Ph.D. to this study protocol. We anticipate utilizing Dr. Matza’s qualitative data expertise in writing up Phase 1 focus group data. This amendment was approved on October 12, 2012.

2. We are also pleased to report that an abstract using preliminary data from this project was submitted to the Center for Mindfulness in Medicine, Health Care, and Society: 11\textsuperscript{th} Annual International Scientific Conference Investigating and Integrating Mindfulness in Medicine, Health Care, and Society (see attached).
Award Period 3, Months 7-9

- **RESET, CONTROL, PIT and TAU provided to 3rd BCT participants, pre and post data gathered**

**PROGRESS:** We continued to randomize primarily 3rd BCT Soldiers to the RESET, CONTROL, PIT, and TAU condition. At the close of this quarter, a total of 1,247 consented Soldiers had been randomized to one of the four conditions (an increase of 138 over the prior quarter). We continued to be very pleased with our rate of enrollment, as we had been informed anecdotally that approximately one third to one half of all 3rd BCT Soldiers would be leaving Ft. Drum due to PCS orders or ETS’ing. Also, Soldiers in the Ft. Drum area continued to have variable training schedules and many Soldiers scheduled for participation in our November groups were unable to attend as they had been deployed for relief following Hurricane Sandy. Additionally, groups were not held during the month of December due to Soldiers’ holiday block leave schedule. Regarding total enrollment, 314 participants had been randomized to the TAU condition; 314 to the PIT condition; 311 to the CONTROL condition, and 308 to the RESET condition. The 14 group-based trainings during this quarter were delivered by one of two certified trainers (Dr. Joanne Fordiani or Nicole Delgado, M.A.). Baseline, pre-training, and post-training data were gathered from participants at these group sessions.

- **1 month follow-up data collection continues**

**PROGRESS:** Follow up questionnaires were sent to participants with a valid mailing address who completed the in-person baseline visit and had been enrolled through the month of January 2013 (1,238 participants). Participants are given the option to return follow up questionnaires to the research team via USPS Priority Mail prepaid envelope, or drop off completed questionnaires at a secure drop box located at the Soldier Readiness Center on post at Ft. Drum. To date, we have received a total of 495 completed follow-up questionnaires. As per study procedures, reminder phone calls continued to be made by study staff to participants whose follow-up data are overdue for return.

Additionally, as you are aware, participants are remunerated for their participation in this study. Participants receive a total of $125 for participation, paid to them via Visa-branded gift cards. We were made aware during this quarter (by a study participant) that the gift cards given to him had been reduced from their original value of $125 to $65 due to the application of service fees. We suspected that this issue was having an impact on our follow up return rate. This was an error on the part of the issuing bank (these cards do not have any applicable service fees) and we worked with the vendor of these cards to rectify this situation, which affected several series of cards that were distributed. The participant who informed us of this issue was re-issued gift cards in order to reimburse the amount that was deducted from his cards. As soon as a resolution to this issue is achieved by the vendor, we will follow up with affected participants to ensure that they receive the full amount to which they are entitled.
• **Scanning of collected data continues**

**PROGRESS:** Scanning of follow up data for the initial sample of 800 participants continued as follow up packets for this cohort were returned to the research team. Scanning of the second 800 participants including 3rd BCT data (both baseline and follow up) also continued. To date, Camber Corporation scanned and compiled into an SPSS-compatible dataset baseline data collected for 1,197 of 1,247 participants. Thus, we were pleased with the progress of data scanning.

• **Additional activities**

1. Study staff continued to recruit Soldiers via established channels discussed previously (e.g. flyers on post, coordination with Ft. Drum staff).

2. On December 6, 2012 an amendment was submitted requesting minor changes to the protocol. Specifically, language was added to the protocol document specifying that Camber Corporation was printing questionnaire booklets and scanning/compiling study data into an SPSS-compatible dataset. We also requested a change from our currently approved procedure to randomize by Platoon to randomization by Brigade. Additionally, a request to remove study staff no longer employed by the National Center for PTSD and no longer engaged with this protocol was made (Leah Brogan, B.A. (former research assistant), Ronte Johnson, M.A. (former Ft. Drum Coordinator) and Abby Altman, Ph.D. (former Assistant Project Coordinator). We also requested the addition of three staff members to this study protocol. Specifically, we added three employees of Camber Corporation (Klainie Nedoroscik, James Piersall, and Aimee Reyes) whose positions on this protocol are as data scanners. This amendment was approved on December 17, 2012.

3. The study’s annual continuing review report to the local VHABHS IRB and R&D Committees was submitted on December 6, 2012. This report was reviewed and approved on December 17, 2012.

4. On January 14, 2013, an amendment requesting the addition of Cassidy Gutner, Ph.D. to this study protocol was submitted. Dr. Gutner will be assisting with manuscript preparation. This amendment was approved on February 4, 2013.

5. On January 25, 2013, documentation of our VHABHS IRB and R&D continuing review approval was sent to DoD HRPO. We received acknowledgement from HRPO on February 4, 2013.

6. An internal quality assurance audit for the informed consent documentation of 599 most recently consented participants was completed in January, 2013 by study staff. This internal audit identified 6 minor inconsistencies across all consent forms. These 6 minor inconsistencies (primarily missing/incorrect dates) were submitted to the VHABHS IRB for review on February 13, 2013.
Award Period 2, Months 10-12

- **RESET, CONTROL, PIT and TAU provided to eligible Soldiers, pre and post data gathered until 1,600 participants enrolled**

**PROGRESS:** Soldiers in the 3rd BCT continued to be the primary population enrolled into the study, along with smaller numbers of Soldiers from other Brigades such as the 10th Sustainment Brigade. At the close of the quarter, a total of 1,442 consented Soldiers had been randomized to one of the four conditions (an increase of 195 since last quarter). Regarding total enrollment, 363 participants have been randomized to the TAU condition; 362 to the PIT condition; 360 to the CONTROL condition, and 357 to the RESET condition. Fifteen group-based trainings were held during this quarter, and were delivered by one of two certified trainers (Dr. Joanne Fordiani or Nicole Delgado, M.A.). Baseline, pre-training, and post-training data were gathered from participants at these group sessions.

- **1 month follow-up data collection continues until complete**

**PROGRESS:** Follow up questionnaires were sent to participants with a valid mailing address who completed the in-person baseline visit and were enrolled through the month of April 2013 (1,424 participants). At the close of this quarter, we had received a total of 585 completed follow-up questionnaires. This brings our overall follow up questionnaire return rate for the award period to 41%. As per study procedures, reminder phone calls continued to be made by study staff to participants whose follow-up data were overdue for return.

- **Scanning of collected data continues until complete**

**PROGRESS:** A one year, no-cost extension to our existing contract with Camber Corporation (through March, 2014) for data scanning and compilation of an SPSS-compatible dataset was negotiated and approved. While scanning has primarily shifted to the second cohort (2nd 800 Soldiers from 3rd BCT), follow up packets for the original cohort of 800 Soldiers continued to be received by the research team. These packets were sent to Camber Corporation and are scanned in an ongoing fashion as they are received. To date, Camber Corporation scanned and compiled into an SPSS-compatible dataset baseline data collected for 1,329 of 1,442 participants. We continued to be pleased with Camber Corporation’s progress.

- **Research technician compiles data codebook and transcribes intrusive thoughts**

**PROGRESS:** This milestone has not been met. Phase 2 implementation duties of the one full time Research Technician employed by this project (including recruitment, scheduling, travel to Ft. Drum, delivery of trainings, and management of the one month follow up questionnaires) have not allowed time for these activities to be undertaken. As you are aware, we have requested funding for an additional research technician and this request continues to be under review.
• Statistician begins preparations for analyses

PROGRESS: This milestone has not been met. As discussed above, we have not been able to hire new study personnel while our request for additional funding is under review. Study staff have conducted some very preliminary, non-complex analyses (see attached presentation slides); however we have a continued need for statistical expertise in the form of a statistician who will have time to conduct complex analyses that are beyond the acumen of current study staff (e.g. hierarchical linear modeling, structural equation modeling, latent growth curve modeling).

• Additional activities

1. Recruitment efforts are ongoing via established channels discussed in previous quarterly reports (e.g. flyers on post, coordination with Ft. Drum staff, briefings at PDHRA).

2. As detailed in above, we were made aware of an issue with our participant reumeration (gift cards). In brief, we learned that the issuing bank debited service fees from a total of 428 gift cards of varying amounts (these cards are not subject to any service fees) and this error affected 238 study participants. The debited amounts were immediately returned to the affected cards once they were identified, and we have worked with both the card vendor and issuing bank to outline a plan to reissue cards to any participants who may have inadvertently discarded affected cards at no cost to the participants or the study. On May 2, 2013 an amendment was submitted requesting the addition of procedures to remedy the above-described issue; this request will allow study staff to notify participants that they received affected card(s) and offer to re-issue the card(s), if necessary. We are hopeful that this remedy will also improve one month follow-up return rates, which we fear have been impacted by this error. This request was approved by the VHABHS IRB on May 6th, 2013.

3. Above, we described an internal quality assurance audit of informed consent (ICF) documentation for 599 participants and identified 6 minor inconsistencies. The VHABHS IRB reviewed these 6 minor inconsistencies, and on March 1st 2013 issued a memo informing study staff that there was no further action or follow-up required by study staff.

4. In mid-February, a formal audit of ICF documentation was completed for the above-mentioned 599 participants by the VHABHS Research Compliance Officer (RCO). The RCO identified three minor inconsistencies (changes made by participants to their completed information without accompanying initials) which were reported to the VHABHS IRB. Notification from the VHABHS IRB was received on March 11, 2013 that there was no further action or follow-up required by study staff.

5. We are pleased to report that preliminary data from this project was presented at the Center for Mindfulness in Medicine, Health Care, and Society: 11th Annual International Scientific Conference Investigating and Integrating Mindfulness in Medicine, Health
Key Research Accomplishments

During this Award Period, preliminary data from 1,197 Phase 2 participants was analyzed. Preliminary findings were submitted to the Center for Mindfulness in Medicine, Health Care, and Society: 11th Annual International Scientific Conference Investigating and Integrating Mindfulness in Medicine, Health Care, and Society and accepted as a presentation. Attached to this Annual Report, please find the submitted abstract as well as the presentation slides.

Reportable Outcomes See Appendices.

Conclusion

At the inception of this award period, we were excited to have resumed recruitment and enrollment following an 8 month delay. Over the course of the award period, we strategically implemented a variety of recruitment techniques to rapidly boost interest in the study, and were able to make excellent progress with enrolling recently returned Soldiers. As a result of our aggressive recruitment techniques, ongoing positive relationships with Ft. Drum personnel, and frequent travel to Ft. Drum for implementation of study groups, we have come very close to our target enrollment of 1,600 Soldiers (a total of 1,442 enrolled participants at the close of this Award Period). Preliminary quantitative data analyses on Phase 2 data for 1,197 participants has shown support for the RESET training, and all trainings continue to be well received by participants. We are pleased to have been granted a one year extension to complete data collection and data analyses. As noted above, we are behind in meeting data related milestones as the project sample has doubled in size, and we are currently understaffed. We remain optimistic that there will be additional funding granted to support the hiring of personnel (statistician and research technician) to support the completion of these milestones. As this project proceeds into Year 4 we will continue recruitment and enrollment of Phase 2 participants until the same is reasonably complete. We then anticipate beginning quantitative data analysis.

References: None.

Appendices

A. Statement of Work

B. Abstract and slides presented at the Center for Mindfulness in Medicine, Health Care, and Society: 11th Annual International Scientific Conference Investigating and Integrating Mindfulness in Medicine, Health Care, and Society

C. Currently approved versions of the RESET, CONTROL, and PIT modules including training manuals and PowerPoint slides.

D. Phase 2 schedule of assessments. PDF versions of the questionnaire workbooks can be provided upon request, but are not included with this submission due to file size.
STATEMENT OF WORK

For ease of review, completed milestones are shaded in grey below:

**Period 1 Milestones:** Administrative committee reviews including the VA Boston Healthcare System’s IRB and R&D committees with Human Research Protection Office (HRPO) will provide Second Level Oversight IRB approval. Similarly, a Federal Certificate of Confidentiality will be obtained within the initial startup period. Hiring of staff through the not-for-profit organization (BVARI) typically takes 4 months. Preparation of the content of RESET and CONTROL will be finalized in regular meetings with the investigation team, with particular input from Dr. Walser on how to train acceptance of thoughts. Military perspective will be provided by Drs. Benham and Barry who are familiar with the target audience. DoD perspective optimizing the training feasibility and adherence to the Comprehensive Soldier Fitness format will be provided by Drs. Adler and McGurk. Focus group feedback about RESET and CONTROL content will take place with 4 small group sessions of 12-15 Soldiers (total n = 60) reviewing the material to assure user acceptability. Hiring of Fort Drum Trainer will occur.

**Period 2 Milestones:** Training of trainers will continue at VA Boston. VABHS IRB and HRPO approvals will be obtained for final versions RESET and CONTROL trainings. Scannable versions of questionnaire packets will be finalized and printed. Data collection will be initiated for Phase 2. All data collection will take place via groups at the Ramada Inn, Watertown NY. All waves of data collection will take place over 7-10 day periods where project staff will be on site. Follow up data collection via mailed questionnaires will occur 1 month post completion of RESET, CONTROL, PIT or TAU. At least once per month, 7-10 day data collection trips will occur in Periods 2 and 3, with participants being randomized and completing the RESET, CONTROL, PIT or TAU.

**Period 3 Milestones:** Conservatively, data collection will be completed with at least 700 primarily 10th Combat Aviation Brigade participants who complete the initial training by Months 1-4 of period 3. It is likely that only partial data (no follow-up data) will be available for roughly another 100 of these participants due to scheduling constraints and general attrition. A recruitment trip coordinated with the timing of PDHRA briefings for the 3rd BCT will occur in Month 4 of Period 3. Utilizing additional funding, scannable versions of questionnaire packets will be printed for an additional 800 participants. Data collection with the 3rd BCT will begin in Month 4 of Period 3 with the goal of randomizing 800 3rd BCT participants to RESET, CONTROL, PIT, or TAU groups. Baseline, pre-training, post-training, and follow up data collection for these participants will continue through months 9-12 of this period. Hiring of the statistician and part-time research technician can begin.

**Period 4 Milestones:** Data collection (baseline and follow-up) and data scanning will continue through the award period until 1600 Soldiers have been enrolled and one-month follow-up data is complete. During Months 1-4, the research technician will begin the compilation of the data codebook and transcription of the qualitative data (intrusive thoughts about deployment). The statistician will begin preparation for analyses (writing of syntax, etc.) during this period. During Months 5-8 a final dataset will be received from Camber Corporation, and data cleaning and checking by the part-time Research Technician will begin under the direction of the statistician. Also during this time, data analyses (quantitative and qualitative) and manuscript preparation will begin. During Months 9-12, both data analyses and manuscript preparation will continue. Additionally during this time, the study team will 1) report findings to Ft. Drum and debrief Ft. Drum leadership and 2) disseminate findings to the scientific community.
<table>
<thead>
<tr>
<th>PERIOD 1</th>
<th>Months 1-4</th>
<th>Months 5-8</th>
<th>Months 9-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHASE 1</td>
<td>• Hiring of staff, administrative work</td>
<td>• Finalization of IRB approval</td>
<td>• HRPO application</td>
</tr>
<tr>
<td></td>
<td>• Certificate of Confidentiality</td>
<td>• Meetings with Fort Drum Leadership for feedback</td>
<td>• Finalization of RESET and CONTROL content for focus group</td>
</tr>
<tr>
<td></td>
<td>• VA IRB/R&amp;D paperwork</td>
<td>• Ongoing bi-weekly conference calls with all project personnel</td>
<td>• Hiring of the Fort Drum Trainer</td>
</tr>
<tr>
<td></td>
<td>• Establish bi-weekly conference calls with all project personnel</td>
<td>• Continued refinement of RESET and CONTROL content</td>
<td>• Plan focus group recruitment</td>
</tr>
<tr>
<td></td>
<td>• Discuss content of trainings</td>
<td></td>
<td>• Training of trainers begins</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHASE 2</td>
<td>• Finalization of HRPO approval</td>
<td>• Review qualitative and quantitative data gathered from first 2 focus groups</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Training of trainers continues</td>
<td>• Conduct another 2 focus groups with feedback on RESET and CONTROL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Recruitment of focus group participants via announcements and advertisements</td>
<td>• Gather data from focus groups on content, utility and acceptability of RESET and CONTROL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Conduct 2 focus groups</td>
<td>• 1 month follow-up data collection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Gather data from focus groups on content, utility and acceptability of RESET and CONTROL</td>
<td>• Review qualitative and quantitative data gathered from second 2 focus groups</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 1 month follow-up data collection</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERIOD 2</th>
<th>Months 1-4</th>
<th>Months 5-8</th>
<th>Months 9-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHASE 2</td>
<td>• Refine RESET and CONTROL content based on focus group feedback and data collection</td>
<td>• RESET, CONTROL, PIT and TAU provided, pre and post data gathered</td>
<td>• RESET, CONTROL, PIT and TAU provided, pre and post data gathered</td>
</tr>
<tr>
<td></td>
<td>• Secure IRB/HRPO approval for final versions of RESET and CONTROL content</td>
<td>• 1 month follow-up data collection</td>
<td>• 1 month follow-up data collection</td>
</tr>
<tr>
<td></td>
<td>• Randomize Companies to training condition: RESET, CONTROL, PIT, TAU</td>
<td>• Recruitment efforts</td>
<td>• Continued recruitment efforts</td>
</tr>
<tr>
<td></td>
<td>• Recruitment efforts</td>
<td></td>
<td>• 800 additional scannable questionnaire workbooks printed</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERIOD 3</th>
<th>Months 1-4</th>
<th>Months 5-8</th>
<th>Months 9-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHASE 3</td>
<td>• RESET, CONTROL, PIT and TAU provided to already recruited participants, pre and post data gathered</td>
<td>• RESET, CONTROL, PIT and TAU provided to 3rd BCT participants, pre and post data gathered</td>
<td>• RESET, CONTROL, PIT and TAU provided to 3rd BCT participants, pre and post data gathered</td>
</tr>
<tr>
<td></td>
<td>• Recruitment of 3rd BCT begins</td>
<td>• 1 month follow-up data collection continues</td>
<td>• 1 month follow-up data collection continues</td>
</tr>
<tr>
<td></td>
<td>• Delivery of RESET, CONTROL, PIT and TAU to 3rd BCT participants begins, pre and post data gathered</td>
<td>• Continued recruitment efforts</td>
<td>• Scanning of collected data continues</td>
</tr>
<tr>
<td></td>
<td>• 1 month follow-up data collection continues for already recruited participants, begins for 3rd BCT</td>
<td>• Scanning of collected data continues</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Scanning of collected data continues for already recruited participants, begins for 3rd BCT</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Continued recruitment efforts</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Objectives: A majority of Soldiers report upsetting intrusive thoughts about experiences from their deployments. This study sought to compare trainings for dealing with intrusive thoughts. PIT provides psychoeducation about intrusive thoughts; RESET and CONTROL both teach skills for dealing with intrusive thoughts. RESET teaches acceptance-based skills for long-term coping whereas CONTROL teaches short-term distress management skills. These trainings were compared with Training as Usual (TAU).

Methods: 605 Soldiers from Fort Drum, NY who returned from deployment 3-12 months ago were randomized with 157 TAU, 155 PIT, 152 RESET, and 141 CONTROL participants. Data were collected at baseline, pre-PIT and post-PIT, pre-skills and post-skills (RESET or CONTROL) and at 1-month follow-up. Several measures including the Philadelphia Mindfulness Scale—Acceptance subscale (PHLMS-A) were gathered.

Results: Repeated measures 4 Group x 2 Time ANOVA (baseline to 1 month follow up) using PHLMS-A data showed a significant interaction \[ F(3,229)=3.20, p=.02 \] with the RESET group being the only condition to show significantly increased acceptance from baseline to follow-up. CONTROL showed a significant decrease over time, while the PIT and TAU showed no significant change. When looking more closely at skills groups over time, a 2 Group x 6 Time interaction emerged \[ F(5,570)=12.86, p<.01 \] with RESET training showing significantly increased acceptance over time, and CONTROL showing a significant decrease over time.

Conclusions: RESET participants increased acceptance relative to all other conditions, replicating preliminary findings from our pilot sample (Fordiani & Shipherd, 2011) but including comparison groups. Data collection is ongoing (target n=1,600), and data will be explored further as sample size increases. However, even at this early stage these findings support the efficacy of a brief mindfulness-based training targeting intrusive thoughts in active duty Soldiers.

Learning Objectives:

1. Describe the phenomenon of intrusive thoughts and relevance to Soldiers
2. Discuss the problematic effects of intrusive thoughts and control-based coping
3. Explain the benefits of a brief mindfulness-based intervention for Soldiers
RESET:
Mindfulness Training for Soldiers

Jillian C. Shipherd, Ph.D., Principal Investigator
Joanne Fordiani, Ph.D., Project Coordinator

Co-investigators/Consultants:
Amy Adler, Ph.D., LTC Dennis McGurk, Robyn Walser, Ph.D., Kristi Salters-Pedneault, Ph.D., Todd Benham, Psy.D., Matt Barry, D.O., and Tim Brown, M.D.

Special thanks to:
Leah Brogan, B.A., Cassidy Gutner, Ph.D., Abby Altman, Ph.D., Nicole Delgado, M.A., and Brian Smith, Ph.D.

Funded by the Department of Defense (USAMRU-E)
Disclaimer: The views expressed in this article are those of the authors and do not necessarily represent the official policy or position of the U.S. Army Medical Command or the Department of Defense.
Disclosure

- We have no actual or potential conflicts of interest in relation to this presentation.
Disclosure, part two…

WARNING!

This presentation may challenge some assumptions about mindfulness…

- Not MBSR-based
- Only 1 one-hour session long
Rationale

- Following trauma, intrusive thoughts (IT) are expected
- How people deal with IT can influence their trajectory
- Our project is a secondary prevention program that teaches how to manage IT
- Thinking about how to best manage IT raises several experimental questions...
  - Is psychoeducation enough?
  - Do people need skills to manage IT?
  - If skills are needed, what kinds of skills?
- Why mindfulness skills make sense
Definition of intrusive thoughts…

Thoughts, memories, or images about any stressful experience, including deployment, that can pop into your mind repeatedly. Often these thoughts are annoying, and they might make it harder for you to concentrate or hard for you to get things done.
So what are we doing and why?

- Developed and testing a mindfulness-based training module (RESET) for coping with intrusive thoughts in active duty Army Soldiers 3-12 months after deployment.

- Comparison groups:
  - TAU: training as usual
  - PIT: psychoeducation about intrusive thoughts
  - CONTROL: traditional CBT skills for coping
  - RESET: Mindfulness-based skills for coping
Thoughts on intrusive thoughts...

- The RESET training targets this one specific area
- 75% of a pilot sample of returning forces report intrusive thoughts about Iraq
- Historically left unaddressed in Army TAU
Examples of Soldiers’ identified intrusive thoughts...

- Combat experiences—self or others
  - “The whistling of a mortar as well as the hum of a rocket flying over my head”
  - “Getting blown up by an IED”
  - “…images of my dead friends being wheeled to the Blackhawk that was taking their remains off the battlefield”
  - “Watching the death of 5 fellow Soldiers from my platoon”

- Concerns about family stateside
  - “That I would lose my son and/or my connection to him”
  - “Thoughts of my husband driving drunk with my daughter in the vehicle while I’m deployed”

- Leadership concerns/concerns about job performance
  - “The careless attitude of my commander and first sergeant…”
  - “The thought of not being valuable to my unit”
Military considerations

- Achieve maximal gains with minimal training time
  “How low can you go?”

- Control-based culture—pros and cons
- Achieve “buy-in”; address religious and/or ‘touchy-feely’ connotations
Goal and conditions

- **Goal:**
  - To assist Soldiers with post-deployment adjustment, specifically dealing with intrusive thoughts.

- **Conditions**
  - Training as Usual (TAU)
  - Psychoeducation on intrusive thoughts (PIT)
  - CONTROL
  - RESET
Overview of Training as Usual

- Comprehensive Soldier Fitness
- Known as “Resilience Training”
- Occurs within units
- 2 hour training with a certified Master Resilience Trainer (MRT)
- We ask about when TAU was given at baseline and 1-month follow-up
Overview of Psychoeducation

- 15-20 minute psychoeducational training provided by study staff
- Educates Soldiers about what intrusive thoughts are
- Normalizes these thoughts
- Identifies when they are a problem
- Provides referral information
Overview of CONTROL

CONTROL

Common intrusive or unwanted thoughts affect almost everyone

Only you can learn to control them

New skills can help you

Thoughts can be stopped

Replace your thoughts with more pleasant ones

Other activities will help distract you

Learning comes with practice: Train your skills!
Overview of RESET

RESET

R - Remember it is normal to have intrusive or unwanted thoughts.
E - Ease up on control, it doesn’t always work well with thoughts.
S - See & accept your thoughts: You are more than just your thoughts.
E - Experience thoughts as they happen: Don’t judge them.
T - Train your skills: Practice is important!
Exercise

BEING LARGER THAN YOUR THOUGHTS: THE MOUNTAIN EXERCISE
Randomized Controlled Trial Phase

- Currently underway for 1,600 Soldiers at Fort Drum in upstate NY
  - 10th Combat Aviation Brigade
  - 3rd Brigade Combat Team
  - Other Brigades
- 1,442 Soldiers currently consented
- Sample for this presentation: 1,197
- Timepoints presented today: baseline to one-month follow up
## Demographics

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>N=1,197</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>91.8%</td>
</tr>
<tr>
<td>Female</td>
<td>8.2%</td>
</tr>
<tr>
<td><strong>Age, years</strong></td>
<td></td>
</tr>
<tr>
<td>28.2 mean</td>
<td>(SD = 6.6; min/max = 19/56; mode = 26)</td>
</tr>
<tr>
<td><strong>Rank</strong></td>
<td></td>
</tr>
<tr>
<td>Private (PV1, PV2, PFC), Corporal, Specialist</td>
<td>57.9%</td>
</tr>
<tr>
<td>Sergeant/Staff Sergeant</td>
<td>27.7%</td>
</tr>
<tr>
<td>Sergeant (1&lt;sup&gt;st&lt;/sup&gt; Class/Master/Major)</td>
<td>5.6%</td>
</tr>
<tr>
<td>Officer (1LT, 2LT, CPT, MAJ)</td>
<td>5.2%</td>
</tr>
<tr>
<td>Warrant Officer (W1—W5)</td>
<td>3.4%</td>
</tr>
<tr>
<td>Other/unknown</td>
<td>0.2%</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
</tr>
<tr>
<td>Black/AA</td>
<td>13.5%</td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>62.2%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>15.8%</td>
</tr>
<tr>
<td>Other</td>
<td>8.5%</td>
</tr>
<tr>
<td><strong>Total number of deployments</strong></td>
<td>Mean=1.93 (min/max = 1/14)</td>
</tr>
</tbody>
</table>
Phase II Overview

Enrollment

Randomization

Follow up data received

N = 1,197

TAU 305
PIT 302
RESET 294
CONTROL 296

92
100
92
103
Measures of interest

Acceptance
- Philadelphia Mindfulness Scale—Acceptance subscale (PHLMS-A)

Symptoms
- Patient Health Questionnaire (PHQ)
  - Somatic subscale
  - Alcohol subscale
- Insomnia Severity Index (ISI)
- Depression Anxiety Stress Scale (DASS)
- Posttraumatic Checklist (PCL)

Practice amount
Results

PHLMS-Acceptance subscale
Baseline to Follow Up—All groups

Group x Time interaction $F(3, 379) = 7.546$ $p = .000$, $\eta^2 = .056$
Results

PHQ-Somatic Subscale
Baseline to follow up—all groups

Group x Time interaction $F(3, 361) = 2.818 \ p = .039, \eta^2_p = .023$
Results

Insomnia Severity Index
TAU group vs. all other groups

Group x Time interaction $F(1,377) = 4.673$, $p = .031$, $\eta^2 = .012$
Results: Trends

- Depression Anxiety Stress Scale (DASS) scores decreased for RESET stress relative to all other conditions (baseline to follow up)
- PHQ Alcohol scale—fewer problems for RESET at follow up relative to all other conditions
- PCL (PTSD)—no trends at this time (possible floor effects)
Skill Practice

Amount of skill practice

$t(191) = .429, p = 0.668$
• 74% of participants across both skills conditions reported practicing (72%, RESET; 77%, CONTROL)
• Mindful breathing was the most preferred RESET skill, followed by observing thoughts, being larger than thoughts, and having kindness toward thoughts
• Daily practice amounts, by group:
Conclusions

- Participants who received training of any kind showed improvements (physical health and sleep), compared to no training.
- RESET showed increased acceptance following training while CONTROL decreased (no change for TAU and PIT).
- This increase in acceptance occurred even with only a brief training...
- …and with relatively low amounts of daily practice.
- Limitations:
  - Small follow up sample size
    - Unable to make gender comparisons, comparing Brigades, etc.
- Results show preliminary support for a brief mindfulness-based training targeting intrusive thoughts.
Future directions

- Completion of data collection
- Exploration of additional variables of interest, for example:
  - Gender
  - Rank
  - Level of combat exposure
  - People who started with PTSD symptoms
Questions/comments?
Definition of Groups:

TAU = Training as Usual (Resilience Training)
PIT = TAU + Psychoeducation about Intrusive Thoughts
RESET = TAU + PIT+ RESET Skills training
CONTROL = TAU + PIT + CONTROL Skills training

General Instructions

This manual provides the general instructions for trainers conducting the protocol, including the informed consent process and administration of measures. This protocol is comprised of 1 in-person visit (Visit 1) and mailed one month follow up questionnaires. The components of Visit 1 include:

1. Informed consent process and administration of baseline measures (ALL participants)

2. Presentation of the Psychoeducation about Intrusive Thoughts (PIT) workshop and pre-and post-PIT measures (PIT, RESET, and CONTROL groups)

3. Presentation of the CONTROL or RESET workshop and pre-and post-workshop measures (RESET and CONTROL groups)

The PIT workshop is a psycho-educational module which informs service members (SMs) about the nature of intrusive thoughts, normalizes these thoughts, and highlights their ubiquitousness. The PIT workshop is designed to be delivered to groups of 30-40 SMs at a time.

The RESET workshop builds upon the psycho-educational groundwork that has been laid by the PIT workshop and is a combination of experiential exercises and visual presentation. The goal of the RESET workshop is to provide acceptance-based strategies for managing intrusive thoughts to SMs returning from deployment. In particular, this training focuses on promoting acceptance of intrusive thoughts (i.e., helping SMs see their thoughts as "thoughts;" creating some distance between themselves and their thoughts, and giving them the ability to observe their thoughts as they occur) and non- judgment/non-reactivity to thoughts (i.e., helping service members to see their thoughts as mental events that are products of the mind and that held non-literally are neither good nor bad). Elements of this workshop are drawn from Acceptance and Commitment Therapy (Hayes, Strosahl, & Wilson, 2003), Acceptance-Based Behavioral Therapy (Roemer & Orsillo, 2008), Mindfulness-Based Cognitive Therapy (Segal, Williams, & Teasdale, 2001) and other
mindfulness and acceptance-based cognitive behavioral approaches. These acceptance approaches are viewed as ideal long-term strategies for managing thoughts. This workshop is designed to be delivered to groups of 10-20 SMs at a time.

The CONTROL workshop builds upon the psycho-educational groundwork that has been laid by the PIT workshop and also a combination of experiential exercises and visual presentation. The goal of this workshop is to provide control-based strategies for managing intrusive thoughts to SMs returning from deployments. The concepts and skills in this workshop are drawn from basic cognitive behavioral approaches. In particular, this training focuses on promoting ways to stop, replace, and distract from intrusive thoughts. This workshop is designed to be delivered to groups of 10-20 SMs at a time.

This manual is a companion to the PIT, RESET, and CONTROL workshop slides. The slides provide the general structure of the workshops. This manual is not meant to provide verbatim instructions for conducting the workshops. Because the RESET and CONTROL workshops are meant to be interactive and in part experiential, the manual and slides together provide structure, guidelines, and suggestions, but they do not need to be followed word-for-word. Material in italics below are suggestions for ways to introduce or approach each topic.

Conducting Visit 1 (ALL Participants):

PART ONE:

1) Informed Consent
2) Administration of Baseline Measures
3) Identification of Intrusive Thought

Welcome everyone and thank them for considering participating in the research study. Impress upon all potential participants that their participation is always completely voluntary, and they may choose to decline participation at any time.

1) Informed Consent

Put up informed consent slides.

Assistants should have already distributed two copies of the informed consent forms, two copies of the HIPAA Authorization form, two copies of the Volunteer Affidavit Agreement, and questionnaire workbooks coded with appropriate subject numbers to participants upon check-in. Using PowerPoint ICF overview slideshow, provide potential participants with a description of the ICF process and summaries of each section of the ICF and major points that are covered in that section.

Encourage SMs to read the forms carefully, and, if they give their consent to participate, to provide the necessary information at the bottom of each page (initials, SSN) and to sign and date the last page as indicated. Use the appropriate ICF overview slides to highlight what needs to be filled out and to be sure that they understand that they have been assigned to one of four conditions (use example of flipping a coin) and during this visit they will get 1) no training, 2) one training or 3) two trainings. Impress upon participants the time commitment expected for each of these conditions. Note again that participation is completely voluntary and that if they decline to participate they may return the form unsigned. Workshop leaders should be available to answer any questions (see sample information below).
Be sure to highlight the study tasks and let the SMs know what to expect. For example, tell SMs that, "Today, after we discuss the informed consent process, if you have agreed to participate we will ask you to spend about 30 minutes filling out some forms. After you complete these forms, some of you will be done with your visit today. Those of you who are asked to stay will receive a short break and then we will ask you to fill out some additional forms both before and after you receive another training that will last about 30 minutes. The forms will take about 15 minutes before, and about 15 minutes after that training. After that training, some more of you will have completed with your visit today. Those of you who are asked to stay will receive another short break and then we will ask you to fill out some additional forms both before and after you receive a second training that will last about 30 minutes. The forms will take about 15 minutes before, and about 15 minutes after that training. When you leave today, regardless how many trainings you received, you will get a gift card for $100.00 as you leave. By signing this consent for, you are agreeing to participate in whichever group you are assigned to and you must be willing to stay for the 4 hour period if needed.

Also, in about a month, everyone will be getting some additional forms in the mail for you to complete at home. These forms should take less than 1 hour of your time. When you receive these forms, the packet will also include a gift card for $25 and a postage-paid return envelope."

Collect one signed copy of each form (ICF,HIPAA Authorization, and Volunteer Affidavit Agreement) from each participant; the second one is for his/her records. Answer any questions that participants may have. If there is anyone who has declined to participate, let them know they are free to leave. Check over all consent forms,HIPAA Authorizations, and Volunteer Affidavit Agreements to be sure that they have all been completed appropriately. Thank those who have agreed to participate.

2) Administration of Baseline Measures

"Next we are going to ask you to fill out some forms. Before you begin filling out these forms, there are a few things we would like you to know. 1) Please turn off all cell phones and other electronic devices. 2) If you have questions about any of the forms that you are filling out, please don’t hesitate to ask us. Raise your hand and we will come over to you to answer your questions. Some of the terms and wording can be confusing, so if you aren’t 100% sure about the question, just ask us. 3) We also ask that you fill out these forms quietly so that everyone can concentrate. 4) Finally, we ask that you STOP completing the forms when you reach the stop sign in your workbook. If you finish ahead of others, this would be a good time to check over your workbook to make sure you have answered all the questions you wanted to. Sometimes pages will stick together, and it is also easy to miss a few questions! 5) We have one additional task that we will ask you to complete after everyone has completed their forms, so please wait quietly until everyone is done.

Instruct participants to open their workbooks to page 1 and begin completing it. Ensure that all participants have ample room to write and provide pens as needed.

Throughout session, answer questions for participants. 3) Identification of Intrusive Thought

Once all participants have completed the baseline assessment portion of their booklet, distribute intrusive thought page with space for writing down their most troubling intrusive thought about deployment. Be sure that each participant received the page that matches their subject number. Prompt them as follows:
"The last thing we will ask you to do before finishing today’s visit is to take a few moments to think about your last deployment. We would like you to identify the most frequent or troubling unwanted thought you have about your last deployment.”

Put up intrusive thought definition slide.

"Intrusive thoughts are thoughts, memories, or images about any stressful experience, including deployment that can pop into your mind repeatedly. Often these thoughts are annoying, and they might make it harder for you to concentrate or hard for you to get things done."

"It is likely that you have had all kinds of thoughts about your deployment - some pleasant, some neutral, and some that are upsetting. We would like you to focus on the intrusive thought that has been coming into your mind most frequently in the past month."

"It might be a thought about something personal you experienced, something that involved others in your unit or maybe even something you heard about. It can be anything, there is no right or wrong—what is important is that it is the unwanted thought that has been popping into your head most often in the past month. You can think of it this way—this is the thought that would be most likely to keep you up at night."

"Just take a minute to identify what that unwanted thought is that has been coming into your mind most frequently this month and actually bring the thought to mind. When you have that thought in your mind, write it down on the page."

"If you are asked to stay for additional trainings, we will be asking you to refer back to this particular thought, but no one else will see your thought, and you won’t have to discuss your thought with anyone else.”

(pause to allow most Soldiers to start writing)

Watch participants to identify Soldiers who are struggling (e.g. not writing down a thought). Approach these Soldiers individually, and prompt them using the following strategies:

A) "We do prefer that you identify a thought from this most recent deployment, but it may be that the thought that distresses you most is from an earlier deployment; if that is the case, you can use that thought

B) "If the thing that bothers you the most is not a deployment thought, you can write that down instead—it might be something like the breakup of a relationship, the death of a loved one, or maybe a really bad day at work"

C) "If you are struggling with this because there’s nothing bothering you now, try to identify the thought from a deployment that used to be the most troublesome to you, and write that thought down.”

As participants finish, collect and check over their identified intrusive thought. If you notice that some people have finished earlier than others, prompt them to self-check their workbooks for completion.

Let TAU-only participants know that they have finished with their participation ("For anyone whose workbook says ‘Baseline-TAU at the top, this means your visit tonight is complete!).

Remind exiting TAU participants that they will be receiving a call from study staff in 2 weeks to verify their address. About 2 weeks after that, they will be receiving a packet of follow up
questionnaires in the mail. Let SM’s know that it should not take more than 1 hour of their time to complete the questionnaires and encourage SM’s to complete the questionnaires as soon as possible after receiving them. Let them know that they can return the questionnaires to the research team in the postage paid envelope that will be provided. Remind them that everyone who returns their completed packet will be entered into a drawing for a prize, and that all participants get a chance at winning as long as their measures are returned to us.

Provide exiting TAU participants with their gift card for $100.00 and a wallet card with referral numbers.

Give all remaining participants (PIT, RESET or CONTROL) a short (5 minute) break and ask them to return promptly.

PART TWO:

1) Pre-PIT Assessment

2) Psycho education about Intrusive Thoughts (PIT) module

3) Post-PIT Assessment

Opening the Session

Thank remaining SMs for staying. Remind participants that they will be completing a few forms before they receive a 30 minute training, and that they will also be completing a few forms afterward. Let them know that each packet of forms should not take more than 15 minutes.

1) Pre-PIT Assessment

We would like you to spend a moment now recalling the intrusive thought that you identified for us about 5 minutes ago. Please take a few moments to really call that thought to mind.”

Allow SM’s about 30 seconds to focus on their intrusive thought. Then, instruct SM’s to complete the other pre-workshop measures: SUDS, PANAS, PHLMS-R, AAQ-II, and EIS:

"Go ahead and turn to the next page of your workbook. While you complete these short surveys, we would like you to keep in mind the thought you identified. Several of the forms you will be filling out ask you to report how you are feeling right now, so as you answer those questions, please consider how you are feeling as you are calling to mind that most troubling or intrusive thought. Please STOP completing the forms when you reach the next stop sign in your workbook.”

Encourage SMs to raise their hands if they have questions during any portion of the assessment, and let them know that you will come to them to answer questions.

2) PIT

SLIDE 1: Title Page
**SLIDE 2: Introduction**

"In tonight’s class, we are going to cover several topics related to intrusive thoughts. I want to briefly introduce you to each point we are going to discuss, so that you’ll know where this workshop is headed. First, we’ll introduce you to exactly what we mean by intrusive thoughts. Then we’ll do an exercise together that will show you what these thoughts are like so that you can recognize them. We’ll also talk about how these kinds of thoughts are normal, and give you some examples of the kinds of intrusive thoughts that are common to almost everyone. Then we will go over the kinds of reactions you can have to intrusive thoughts. Finally, we’ll discuss ways in which these thoughts can be problematic, specifically when and how to seek help for dealing with these thoughts if they get to be too stressful.”

**SLIDE 3: What are intrusive thoughts?**

"First, since we are going to be talking a lot about these kinds of thoughts, it’s important that we explain to you exactly what we mean when we say ‘intrusive or unwanted thoughts’.”

"Intrusive thoughts are thoughts, memories, or images about any stressful experience, including deployment that can pop into your mind repeatedly. Often these thoughts are annoying, and they might make it harder for you to concentrate or hard for you to get things done."

"We have intrusive thoughts about all kinds of things; even as I am standing here giving this talk I am going to have the occasional intrusive thought. Like, "did I turn the iron off this morning?", and I’m guessing that during this class, you’ll probably have some intrusive thoughts, too.

"Sometimes it’s helpful to actually be able to see a live example of an intrusive thought, so we are going to do an exercise together that will show you what these kinds of thoughts are like, which can help you to recognize them when they happen. Is everyone willing to participate? Great! In a minute, I’m going to put up an unfinished sentence on this slide. Your task is to NOT finish the sentence...that’s it, that’s your only task! Just give your brain some R&R. Ready? (advance slide to “Mary had a little_______.” and read the sentence out loud)

**SLIDE 4: Training Exercise**

"Well, how did you do? By a show of hands, how many people had a word pop into their heads?? (pause) Even though we decided in advance to not finish the sentence? (SMs raise hands)...and what was that word? All together now..."lamb!"

**SLIDE 5: Lamb**

"So you see, even though we told our minds not to finish the sentence, the word lamb popped into our heads anyway. And this is an example of intrusive thoughts in action. They can pop in to our minds when we are least expecting them to, and they can even happen when we specifically tell our minds NOT to think about something!

**SLIDE 6: Unwanted deployment thoughts**

"Even though we can have unwanted thoughts about all types of things. In this training tonight we’ll talk primarily about deployment thoughts because we know that you have all
had a recent deployment – so you all have that in common. In addition, we know that after deployment, most people will have thoughts about your deployment experiences that will leap into your mind from time to time. Sometimes these will be fond memories and sometimes they will be intrusive or unwanted thoughts.”

**SLIDE 7: Intrusive thoughts are normal!**

“*It’s actually completely normal to have these kinds of intrusive thoughts—most people do have them after coming home. Now, some of you might be thinking, “Well, that doesn’t apply to me, because I don’t have any unwanted thoughts about deployment”. And that’s okay, because it is possible to have unwanted thoughts about all kinds of things – that’s just the way our minds work. For example, you might have unwanted thoughts about a mistake you made at work, or about a relationship. So it’s important to know that the information we’ll be giving you tonight applies to ALL kinds of unwanted thoughts. For that reason, I’m going to encourage to not just tune-out of this training.”*

“It is really important to remember that having thoughts or memories about your deployment or other experiences is completely normal and just your mind’s way of sorting through your past and trying to make sense of it all. It doesn’t mean you’re going crazy, even though it may feel that way sometimes.”

**SLIDE 8: Examples of intrusive thoughts**

“Let’s take a few minutes to talk about examples of common unwanted thoughts. I have some examples here on this slide (call out each one as you pull it up on the slide)

“By a show of hands, how many of you experience unwanted thoughts about anything in this deployment-related category?”

Then go through the ‘other’ category and ask, “by a show of hands, any of these?” (SM’s raise hands as you call out each one).

*Note to trainer: Be sure to make a distinction between “Something you heard” (give examples of gunfire, a blast, or an explosion) and “Things you heard about” (give example of something they heard about from someone else that may have happened to another unit, or another deployed Soldier, etc.).

“Now here are some other common examples.” (read list)

**SLIDE 9: Common emotion-based reactions to unwanted thoughts**

Sometimes intrusive thoughts will set off all sorts of reactions as if you were actually still in a deployment setting. So these thoughts can really get your emotions and physical reactions going. As I go through this list, think about whether or not any of these might apply to you.”


**SLIDE 10: Physical Reactions to unwanted thoughts**

How about physical reactions? Like your heart racing? Feelings of anticipation? Anxiety? Upset stomach? Sweaty palms? It’s important for you to know that if you are feeling any of
these reactions, you aren’t alone. These are all very common reactions to unwanted thoughts.”

**SLIDE 11: When unwanted thoughts cause difficulty**

"Now, we’ve been talking about how these thoughts and reactions are normal, but it is also important to know what to do if intrusive thoughts are causing difficulty in your life. You might notice that you aren’t as able to focus your attention well at work, or maybe you are distracted by the thoughts when spending time with your family & friends because unwanted thoughts keep popping up. You might also notice that you have trouble sleeping, or that you are using alcohol or drugs to try to cope with the thoughts. Or maybe you just feel overwhelmed because the thoughts happen frequently and are upsetting to you. If you find that these things are happening to you, there are some things you can do to manage these thoughts”

**SLIDE 12: What to do**

"If you find that these things are happening to you, first remember that you are not alone. And it is important to know that there are several things you can do to help manage these unwanted thoughts. You can talk to a buddy, keep a journal of your thoughts, and practice healthy living—things like exercising regularly, utilizing spirituality, refraining from drugs, and using alcohol only in moderation. You can also seek assistance by calling these numbers and talking with someone. You don’t have to worry about memorizing these numbers, we’ll give you a card with all of this information on it that you can take with you.

**SLIDE 13: Wrapping up**

"As we wrap up our workshop tonight, there are a few key take-home points that we would like you to remember: 1) intrusive or thoughts are normal, and are common after deployments or any other kind of stressful experience 2) you can have all kinds of both physical and emotion-based reactions to intrusive thoughts, and these reactions are normal too 3) sometimes these thoughts can cause difficulty in your life, and it is important to know that you can seek help for dealing with these thoughts if they get too overwhelming.

**Slide 14: Thank You**

"Thank you for your time, attention, and service to our country. We’re now going to ask you to complete some additional questionnaires.”

**3) Post-PIT Assessment:**

Instruct SM’s to complete the post-workshop measures: SUDS, PANAS, PHLMS-R, AAQ-II, EIS, ETO and QUIZ:

"Before you move on to the next part of your workbook, take a moment to call into your mind the thought that you focused on before training began—the one that you identified earlier this evening.

Put up **SLIDE 14**.

Allow participants about 30 seconds to call the thought to mind.
"Now go ahead and turn to the next page in your workbook. While you complete these few short surveys, we would like you to keep in mind the thought you identified earlier as well as the information you learned in the training you just received. Please STOP completing the forms when you reach the next stop sign in your workbook. If you notice that you have finished before others, please take time to check over your workbook to make sure you have answered all the questions you intended to.

If you notice that people have finished earlier than others, prompt them to self-check their workbooks for completion. Let TAU+PIT participants know that they have finished with their participation ("For anyone whose workbook says ‘Baseline-PIT at the top, this means your visit tonight is complete!).

Remind exiting PIT participants that they will be receiving a call from study staff in 2 weeks to verify their address. About 2 weeks after that, they will be receiving a packet of follow-up questionnaires in the mail. Let SM’s know that it should not take more than 1 hour of their time to complete the questionnaires and encourage SM’s to complete the questionnaires as soon as possible after receiving them. Let them know that they can return the questionnaires to the research team in the postage paid envelope that will be provided. Remind them that everyone who returns their completed packet will be entered into a drawing for a prize, and that all participants get a chance at winning as long as their measures are returned to us.

Provide exiting PIT participants with their gift card for $100.00 and a wallet card with referral numbers.

Give all remaining participants (RESET or CONTROL) a short (5 minute) break and ask them to return promptly.

During the break, put up the “testimonials” slide for the next presentation (Slide 1): either RESET or CONTROL

PART THREE:

1) Pre-RESET OR CONTROL Assessment

2) RESET OR CONTROL Workshop

3) Post-RESET OR CONTROL Workshop

Opening the Session

Thank remaining SM’s for staying. 1) Pre-RESET OR CONTROL Assessment

“We would like you to spend a moment now recalling the intrusive thought that you identified for us earlier tonight; the one you focused on during the last training. Please take a few moments to really call that thought to mind.”

Allow participants about 30 seconds to call the thought to mind.

Then, instruct SM’s to complete the other pre-workshop measures: SUDS, PANAS, PHLMS-R, AAQ-II, and EIS:

“While you complete these short surveys, we would like you to keep in mind that most troubling or intrusive thought. Just like last time, several of the forms you will be filling out
ask you to report how you are feeling right now, so as you answer those questions, please consider how you are feeling as you are calling to mind that most troubling or intrusive thought. "Now go ahead and turn to the next page in your workbook and begin filling out the forms. Please STOP completing the forms when you reach the next stop sign in your workbook."

Encourage SMs to raise their hands if they have questions during any portion of the assessment, and let them know that you will come to them to answer questions.

**TRAINERS: AT THIS TIME, REFER TO EITHER CONTROL WORKSHOP INSTRUCTIONS OR RESET WORKSHOP INSTRUCTIONS (which begin on page 19)**

**CONTROL Workshop**

The CONTROL workshop is structured around CONTROL acronym (below). You will introduce the concepts and then the acronym as a way to remember the concepts that participants have learned.

- **C**ommon intrusive or unwanted thoughts affect almost everyone. (Psychoeducation)
- **O**nly you can learn to control them. (Illustrates that there are strategies they can learn to control thoughts)
- **N**ew skills can help you. (Illustrates utility of employing strategies to manage thoughts)
- **T**houghts can be stopped. (Thought stopping skills)
- **R**eplace your thoughts with more pleasant ones. (Thought replacement skill)
- **O**ther activities will help distract you. (Distraction from intrusive thought skill)
- **L**earning comes with practice: Train your skills! (Practice)

Once the pre-workshop assessment is complete open the workshop.

**SLIDE 1: Comments from Soldiers about the CONTROL training**

**SLIDE 2: Title page**

"During this part of today’s workshop, we’re going to be continuing our discussion of unwanted thoughts. We’re going to specifically cover some strategies for dealing with unwanted thoughts. In particular, we are going to teach you strategies that will help you to get unwanted thoughts under control and to feel a sense of mastery over these thoughts. These skills can be applied to many areas of your life, but since you all have deployment in common, we are going to focus on those thoughts.

**SLIDE 3: What’s in it for Me?**

Note to trainer: Be sure to emphasize the main point of this slide, which is that the ability to focus their attention where they want it to go is what’s in it for them, and that we will be teaching this to them via skills."
“Now, you may be thinking, what good is this training? You already told me what intrusive thoughts are—what else do I really need to know? What does this training have to do with me? Here’s the deal—we are going to be teaching you a way to control your thinking. It’s a kind of training that warriors have been doing for thousands of years, because this type of training keeps your mind under control.

“Have you ever noticed that sometimes you’ll be doing something, maybe something important, or something you just want to focus your attention on, and your mind wanders away from what you’re doing? Suddenly you’re thinking about something you don’t want to be thinking about, like some bonehead thing you did the other day. Or for the single guys, maybe even a bad date you had last Saturday night! And maybe your mind wanders to things from the past, like stuff that happened when you were overseas?

Of course, this mind wandering happens to everyone. No one has a mind that is perfectly focused, our mind wanders all over the place. The thing is though, every time that happens, you are out of the game. Your body is here, but mentally you are somewhere else. So the training today will help you train your mind to be more under your own control. It’s kind of like doing mental push ups—the more you train your mind in these skills, the more mental strength you will have. **It teaches you how to control your attention** even when under pressure—which I’m sure you’ll agree is important for Soldiers to learn. **And these skills I’ll be teaching you will help you to train your attention on what you want to be focusing on—things that are important to you.**

These skills won’t just make you a better warrior, but will also help you to control your mind in all sorts of different contexts, like when you are at work, or at home with your family, or playing sports. Heck, it may even make you better at Call of Duty (although this has not been scientifically proven)! This is a kind of strategy that is used by all sorts of people, including professional athletes, to help them manage when unwanted thoughts are getting in the way.

**SLIDE 4: Acronym**

“Now, I know that you get taught A LOT of acronyms…and yes, we’ve got another one for you! This acronym will help you remember the things we talk about in the class today—it’s called CONTROL for a reason-each letter of CONTROL will help you remember a principle we cover. Let’s face it—we can’t give you a training without an acronym! But don’t worry—we’ll give you wallet cards so that you don’t have to memorize it and we’ll go over it in more detail later. (Review each letter of CONTROL) These skills will help you train your attention and stay focused when you are under pressure.

**SLIDE 5: Strategies for Managing Intrusive Thoughts**

“Now just a little while ago we talked about what intrusive thoughts are, and you learned that intrusive thoughts are normal; almost everyone has them, and it doesn’t mean you’re going crazy!” But what do you do to manage these thoughts when they happen?

“Well probably you already have some strategies that you use when you have an unwanted thought.”

“The key here is that strategies for managing these thoughts are most useful if a) you have a lot of different techniques you can use and b) you have practiced these techniques extensively. Managing unwanted thoughts is a skill- and just like any other skill you need to train it. So today we are going to cover a few different strategies to practice and use. Some
of these may be things that you are already doing, and some may be new to you. If you already use these skills, or they just seem like "common sense" you might be tempted to tune out of the rest of this workshop—but I’m going to ask you to stick with us, because we’re going to teach you how to use these skills in a way that will make them as effective as possible”.

**SLIDE 6: Evidence that These Strategies Work**

Now, we know from the research that these strategies do work. In fact, the skills we will be practicing with you are some of the fastest ways to get your mind back where you want it to be in any given moment. This is a study that illustrates what happens when people use the kinds of skills we will be teaching you to control their unwanted thoughts. As you can see, in this study, when people didn’t use any skills, they had unwanted thoughts pretty frequently. But, when they used one of the skills we’ll be teaching you today (either thought replacement or distraction), they were able to control the frequency of those thoughts quite well.

**SLIDE 7: Thought Stopping - Yell, Think, See or Feel "Stop"**

"The first technique we’ll cover today is called 'thought stopping.' This may be something that many of you have tried to do from time to time.

"Now, there are a few different ways to practice thought stopping, so you have some choices as to how you do it. We are going to talk about 4 different strategies and we are going to practice a couple of them all together during the workshop."

"The first way to do this is probably the simplest but is not one you will want to do in public most likely—it involves yelling 'stop' every time an unwanted thought enters your mind. We are actually going to practice this one all together in a minute so that you can see what a great way it is to stop thoughts right in their tracks. That’s right—we’re all going to be yelling together! Practicing thought stopping is going to be important for you, so we will actually do 2 thought stopping practices today."

"A quieter alternative is to just yell 'stop' in your mind whenever an unwanted thought pops up. So rather than actually yelling out loud you just imagine that you are yelling stop, and we call this skill “thinking stop.”

"Another quiet version involves imagining a stop sign in your mind’s eye, and this stops the thought or image that is in your head. So for our purposes we are calling this 'See Stop.' "

"The last one is ‘feel stop’ which I will describe in more detail in a minute...”

"The key to each of these strategies is to use them each and every time the unwanted thought comes up. If you have an unwanted thought, yell stop! Moments later, you may have have another unwanted thought, so you have to yell stop again! The key is to practice again and again."

**SLIDE 8: Training Exercise: Thought Stopping – Yell "Stop"**

"So now we’ll show you how to actually practice this strategy. For the next couple of minutes, I’m going to have you try thought stopping. In a moment, I’m going to give you a
thought to think about—and that’s the thought that we’ll practice stopping. So you will be intentionally thinking this particular thought. Then, every once in a while, I will say 'now,' and I want you to practice stopping that thought by yelling STOP really loudly."

"Then, after a brief pause, I will instruct you to go back to thinking about the thought, until the next time I say 'now.' And then you can use the thought stopping strategy of yelling STOP. We'll practice this for about 2 minutes."

"Ready? Now let’s get comfortable...

SLIDE 9: Jelly Donut

Okay, the thought I am going to have you practice stopping is a thought about a jelly donut.

Go ahead and close your eyes... or if you aren’t comfortable with that, you can just pick a spot on the floor to fix your gaze on. During the exercise, I’m going to ask you to keep your eyes closed, and I’ll let you know when it’s time to open them again. So you are thinking about a delicious, flaky, gooey jelly donut until I say 'now' and everyone can yell STOP together. Ready...start thinking about the yummy warm doughnut (pause) see it in your mind (pause) ‘now’ (let them Yell Stop). Remind them to close eyes if they have opened their eyes after yelling. As soon as they have settled say, return to thinking about the delicious, soft donut and ‘now’.....repeat this about 4 times - for the duration of the 2 minute exercise, Then instruct them to open their eyes and return to the room."

[Practice exercise for 2 minutes]

SLIDE 10: Exercise Processing

"Were you able to stop your thoughts?This is actually harder than what it will be like in real life, because I was asking you to come up with the intrusive thoughts of donuts before you tried the "yell stop" skill. In the real world, the intrusive thoughts will come up all on their own, and you will just need to focus on using the skill to stop them. Now yelling stop might seem a bit silly, and you might have felt a bit silly practicing it, but it is actually a very effective skill that can be used."

"The key to this exercise is to practice stopping your thoughts over and over, almost as if you are doing strength training or if you are training for a marathon by running every day and improving your endurance."

SLIDE 11: Thought Stopping – Quieter Versions

You can use this same technique or the other quieter versions of this where you think about yelling stop – which we call “think stop” OR you see a stop sign in your mind’s eye which we call "see stop". These quieter versions are really good for when it might not be convenient to be yelling ‘stop’...for example late at night, or when you are in a public place. Now, I want to move onto another thought stopping technique, ‘Feel Stop.’ "

SLIDE 12: Training Exercise: Thought Stopping – Feel Stop
"The Yell, Think, and See stop technique doesn’t work for everyone, but there is another thought stopping technique that you can use to control these thoughts. We call it the ‘feel stop’ skill."

"Feel stop involves using a rubber band on your wrist to help with thought stopping. Everytime the unwanted thought pops into your head, you snap the rubber band, which ‘snaps’ you out of the thought. Now you don’t have to snap it super hard!! Just snap it hard enough so that you can feel it on your wrist and it can remind you to ‘snap out of it’. It is a physical reminder of what you are trying to do."

"I am going to pass out rubber bands to each of you so that we can try this. Now remember these are for you to use as a thought stopping skill, not to snap your neighbor with. This rubber band technique of “feel stop” is a great strategy for those of you who have a hard time picturing things in your mind, and are in public so can’t use the strategy we just used."

"Okay, just like last time, I’m going to give you a thought to intentionally think about and then we are going to practice the “feel stop” skill all together."

**SLIDE 13: Hot Fudge Sundae**

"This time, I’m going to ask you to think about a cold, sweet delicious hot fudge sundae, and every once in a while, I will say ‘now,’ and I want you to practice stopping that thought using the rubber band."

"Then, after that brief pause, go back to thinking about the thought, until the next time I say 'now'. We'll practice this for about 2 minutes."

"Ready? Get comfortable, close your eyes or fix your gaze on the floor in front of you. Remember—keep your eyes closed until I tell you to open them! Begin."

[Practice exercise for 2 minutes] Instruct them to open their eyes and return to the room.

**SLIDE 14: Exercise Processing**

"By a show of hands, who was able to stop their thoughts using the rubber band technique of “feel stop”? Again, here I was asking you to come up with the intrusive thoughts of a sundae and then try practicing with the rubber band the feel stop technique. In the real world, the intrusive or unwanted thoughts will come up and your only job will be to practice the ‘feel stop’ strategy. To help you do this we are going to let you keep these rubber bands to use at home.

"The key to this ‘feel stop’ exercise is to use the rubber band as a very physical reminder to stop the thoughts. Some people find that this is a lot easier since there is the actual feeling of the rubber band snapping to interrupt the intrusive thought and get your mind back on track."

**SLIDE 15: Thought Replacing**

"Now we’ll talk about another strategy you can try, called ‘thought replacing’.

"In this technique, rather than just stopping an unwanted thought altogether, you practice replacing it with another, more positive thought or image."

"To practice this, you need to have a few positive thoughts or images that you can call to mind when the time comes. When you are in the middle of the intrusive thought it will be
hard for you to come up with a replacement thought, but if you are prepared in advance with a positive thought then it is much easier.

For example, these could be images of a loved one, a particular sentence that makes you feel confident or happy, or a scene that makes you feel relaxed. So, for example, someone might have an image of a family member or a pet in their mind that they call up when they are having an unwanted thought. Or, they may imagine relaxing near the ocean (gesture to slide) or being by a peaceful calm lake or having a wonderful relaxing meal- some people think of a steak dinner or a decadent dessert- whatever feels like a good and happy thought to you. Spend a moment now and think of one or two thoughts or images that make you feel good. Raise your hand when you have something happy or relaxing or positive that you can use for today."

"Okay, now that you've got at least one of these positive replacement thoughts in mind, let's practice."

**SLIDE 16: Training Exercise: Thought Replacing**

"This exercise will be similar to the one we did with thought stopping, except this time I want you to use one of the positive, replacement thoughts that you came up with. So I will tell you what you will be thinking about and then instruct you to replace that thought with the positive image, memory or phrase that you generated."

"First, the intrusive thought this time isn't going to be food related. For this exercise I want you to think about a time in the past when you felt really embarrassed. This doesn't have to be something that happened recently (although it could be), but it should be something that you can call into your mind, along with that feeling of embarrassment that the event generated. It doesn't have to be anything in particular, just sometime that you felt embarrassed, it could even be from when you were a kid. Raise your hand when you have something in mind, don't worry I'm not going to make anyone talk about what their experience was, I just need to know when you have something in mind. Thoughts about this embarrassing event are going to be controlled in this exercise by using thought replacement with the positive thought, image, memory or phrase that you came up with."

"So now we'll show you how to actually practice this strategy. For the next couple of minutes, I'm going to have you try thought replacing. First, I'm going to have you intentionally think about your embarrassing event. Then, every once in a while, I will say 'replace,' and I want you to practice replacing the thoughts about the embarrassing event with one of the positive events, image, or phrase you came up with. As you replace the embarrassing event, try to really call into mind all of the details of the positive replacement thoughts or images. For example, smell the smells of the ocean, or the breeze on the top of the mountain. For whatever your positive image is, really try to experience those thoughts or events."

"Then, after that brief pause, go back to thinking about the embarrassing event, until the next time I say 'replace'. We'll practice this for about 2 minutes. This will give you a chance to practice this skill of thought replacing several times."

"Ready? Okay, close your eyes or fix your gaze on the floor in front of you. Okay, start thinking about your embarrassing event." (give prompts throughout)

[Practice exercise for 2 minutes] Ask them to open their eyes and return to the room
**SLIDE 17: Exercise Processing**

"By a show of hands, who was able to replace your thoughts? This one was tricky because you had to remember the embarrassing event AND also come up with the replacement thought. Again, just like the other exercises, in real life, the unwanted thought will just pop into your mind, and your job is to simply be ready with your positive images, thoughts, memory or phrase to help you replace the unwanted thought with a more positive one."

"The main point of this exercise is to use a positive, calming thought to replace thoughts that are painful or distressing. Your job is to always have one of these positive, calming thoughts at the ready so that if you have an intrusive thought, you can replace it right away. This thought replacing skill is especially good to use late at night if you are having trouble sleeping. But, you will need to practice it ahead of when you need it most so that the skill is ready for you during difficult times."

**SLIDE 18: Distracting**

"The last technique we'll talk about today is the skill of 'distracting.' This is something that probably everyone in this room has tried before...I certainly have tried it with my unwanted thoughts. Basically, you use a mental or physical activity to disrupt that unwanted thought when it comes into your head."

"There are probably thousands of possible activities that you can use to distract from your unwanted thoughts. The key is to pick an activity that helps you to control your thoughts in some way. You need something that will really get your mind off of the unwanted thought when it happens. Everyone is different, so you will need to pick the kind of activity that will work best for you.

Also, you need to keep in mind that sometimes people do things that are unhealthy to distract (e.g., using alcohol or drugs). Obviously, this isn't the best way to distract—you need to choose healthy distractors for this strategy to work for you. The key is to engage in the distracting activity to help you keep your mind from going back to the distressing thought. If you start to get bored with the activity but the thought is still around, move to another engaging activity. If you need to, you can keep switching activities until the worst of the thoughts have subsided."

"Even though this is something that most people have already tried, we want to help you be more prepared to use this skill. Being prepared before the intrusive thoughts come make you better able to use the skill effectively. We know that it helps to have a list of distracting activities you can do on hand and ready for when the unwanted thoughts come. So, right now, we'd like each of you to take the time to generate a list of at least five healthy distracting activities that you can do when you are having unwanted thoughts. We're passing out cards now – when you get yours, please write down five things you can do to distract from unwanted thoughts. This is your personal list and won’t be shared with anyone; it is just something to refer back to when the unwanted thoughts come. You will be able to take these lists home with you to refer back to in the future."

"Remember that these should be healthy things, and they work best if they really keep your mind active.Here are some ideas to get you started."

**SLIDE 19:**
"Go ahead and start your list. Once you have at least five distractors on your list, raise your hand."

**SLIDE 20: Practicing with Deployment Thoughts**

"Now that you have learned several strategies for approaching unwanted thoughts, we would like you to practice one of them with that most distressing or frequent thought about deployment that you identified earlier tonight—the one we reminded you of at the beginning of this session. You can choose which strategy you would like to practice: quiet thought stopping skills (either thinking ‘stop’, seeing a stop sign, or feeling stop using your rubber band) or thought replacement. You can also use distraction if it is something that you can do here without disrupting the people around you. Take a minute to decide which strategy you want to use and raise your hand when you’ve decided. You can always switch techniques during practice but you should at least know which one you are starting with. Is everyone ready? – raise your hand if you know which skill you are planning on..."

"OK, for the next two minutes, intentionally think about the distressing thought that you identified earlier, and then practice one of these skills you have learned. I will ask you to start with the thought that you selected as your identified thought, but you may find that your mind moves onto other related...or even unrelated thoughts...and that’s ok. Just so long as you start out with the thought that you identified earlier. For the next two minutes, intentionally think about your distressing thought, and then practice one of the skills you have learned. Take a moment to think about which strategy you would like to practice."

"Ready? OK, you can start now, and we’ll tell you when the exercise is over."

Allow SM’s to practice for ~2 minutes. At the end of the two minutes, prompt them to open their eyes and return to the room. Briefly process exercise with SM’s before wrapping up.

**SLIDE 21**

3) Post-CONTROL Assessment

Instruct SM’s to complete the post-workshop measures: **SUDS, PANAS, PHLMS-R, AAQ-II, EIS, and ETO**.

"Now go ahead and turn to the next page in your workbook. While you complete these short surveys, we would like you to keep in mind the thought you were practicing managing. Then when everyone finishes with these, we can wrap up the workshop. If you finish before your peers, please take a moment to review that you’ve answered all items in this section of the workbook."

**SLIDE 22: Practicing CONTROL in Your Life**

Now, you’ve learned some control strategies that you can use, but now let’s talk a little bit about how you can practice them in your actual life.

You might be thinking to yourself, "Why is practice important? I can just plan to use these skills when I’m having a bad day.” But in order to have these skills trained up and ready to go, you’ll need to do some practice ahead of time to train your mind. That way these skills will be ready for you to use when you need them. You don’t just get up one day and say "I think I will run a marathon today”; you need to train to do that, and these skills work the same way. One way to practice them is by actually setting aside time to do these exercises."
We’ll be giving you some audio CDs and other materials today so that you can do this. Just like any kind of physical training, the more you use the muscle the better it works. Now, each of these exercises takes 5 minutes or less. Truly, it would be great if you could do two or three exercises a day; that would be ideal (so that’s just 10-15 minutes of daily practice). But, we know you’re busy and have lots of other things going on, so even if you could do one exercise, that’s 5 minutes or less a day, you will still be getting enough training to see real changes."

Remind SMs that we will be asking about their practice as part of the follow up measures.

But, you can also incorporate these strategies into your daily life. So, say you are at work and you start noticing some kind of unwanted thoughts popping up—you can start bringing in these strategies even as you’re doing whatever you’re doing; maybe you can try stopping your thoughts as they come.

Or, you can also take a little break to try these strategies. So, you can even say to your coworkers, I need a minute to go get "CONTROL.” And then maybe just spend a short few moments, it doesn’t have to be a long time, to practice.

"Finally, there are other things you can do to help you control these thoughts, even as you practice these new strategies. For example, remember that you can always talk to your battle buddies about deployment thoughts. Or, you can try keeping a journal where you write down the thoughts that are coming up for you. These are in line with the principle of control. And there are other things that can help you keep your mental muscles strong—like exercising regularly, utilizing spirituality, refraining from drugs, and moderating your alcohol use."

SLIDE 23: Acronym & Wrapping up

As you summarize the workshop, be sure to highlight three key points – that unwanted thoughts are normal after combat, that there are ways to control these thoughts but that they take practice, and that thought stopping, thought replacing, and distraction are strategies that they can practice.

Review the workshop and re-introduce the CONTROL acronym to help participants remember what they have learned. The CONTROL acronym is:

Common intrusive or unwanted thoughts affect almost everyone.

Only you can learn to control them.

New skills can help you.

Thoughts can be stopped.

Replace your thoughts with more pleasant ones.

Other activities will help distract you.

Learning comes with practice: Train your skills!

As you are introducing the CONTROL acronym, distribute the reminder wallet card with CONTROL acronym. Distribute the audio CD with practice exercises. Elicit questions from SMs about the ideas and strategies that you covered today.

SLIDE 24: Thank You
Thank the audience again for their time, attention, and service to our country.

Remind participants that they will be receiving a call from study staff in 2 weeks to verify their address. About 2 weeks after that, they will be receiving a packet of follow up questionnaires in the mail. Let SM’s know that it should not take more than 1 hour of their time to complete the questionnaires and encourage SM’s to complete the questionnaires as soon as possible after receiving them. Let them know that they can return the questionnaires to the research team in the postage paid envelope that will be provided. Remind them that everyone who returns their completed packet will be entered into a drawing for a prize.

Provide exiting participants with their gift card for $100.00.

Let SMs know that you’ll be around to talk with them about any questions or concerns following this training.

**RESET Workshop**

The RESET workshop is structured around RESET acronym (below). You will introduce the concepts and then the acronym as a way to remember the concepts that participants have learned.

- **R**emember it is normal to have intrusive or unwanted thoughts. (Psychoeducation/normalization)
- **E**ase up on control, it doesn’t always work well with thoughts. (Control is the problem)
- **S**ee & accept your thoughts: You are more than just your thoughts. (Acceptance/Observing thoughts skills)
- **E**xperience thoughts as they happen: Don’t judge them. (Acceptance/non-judgment skills)
- **T**rain your skills: Practice is important! (Practice)

**SLIDE 1: Comments from Soldiers about the RESET Training**

**SLIDE 2: Title page**

"During this part of today’s workshop, we’re going to be continuing our discussion of unwanted thoughts. As we said earlier, we all experience unwanted thoughts from time to time—I know I do—and today’s class is going to specifically cover some strategies for dealing with unwanted thoughts of all kinds. These skills can be applied to many areas of your life, but since you all have deployment in common, we are going to focus on those thoughts. A lot of the things we’re going to be teaching you today might seem new and different to you. Some of the strategies we’re going to teach you might strike you as a bit unusual. We’re also going to ask you to try some things today that you might have never have tried before—but I’m going to ask you to keep an open mind, because research has shown over and over that in fact these strategies are the best way for soldiers to manage unwanted thoughts when they happen."

**SLIDE 3: What’s in it for Me?**
Note to trainer: Be sure to emphasize the main point of this slide, which is that the ability to focus their attention where they want it to go is what’s in it for them, and that we will be teaching this to them via skills.

“Now, you may be thinking, what good is this training? You already told me what intrusive thoughts are—what else do I really need to know? What does this training have to do with me? Here’s the deal—today we are going to be teaching you a way to train your mind. It’s a kind of training that warriors have been doing for thousands of years, because this type of training keeps your mind aware.

"Have you ever noticed that sometimes you’ll be doing something, maybe something important, or something you just want to focus your attention on, and you mind wanders away from what you’re doing? Suddenly you’re thinking about something you don’t want to be thinking about, some bonehead thing you did the other day. Or for the single guys, maybe even a bad date you had last Saturday night! And maybe your mind wanders to things from the past, like stuff that happened when you were overseas?

Of course, this mind wandering happens to everyone. No one has a mind that is perfectly focused, our minds wander all over the place. The thing is though, every time that happens, you are out of the game. Your body is here, but mentally you are somewhere else. So the training today will help you train your mind to be more aware of what’s happening in the moment. It’s kind of like doing mental pushups—the more you train your mind with these skills, the more awareness and mental strength you will have. It teaches you how to focus your attention even when under pressure—which I’m sure you’ll agree is important for Soldiers to learn. And these skills I’ll be teaching you will help you to train your attention on what you want to be focusing on—things that are important to you.

These skills won’t just make you a better warrior, but actually can help you enjoy your life more. If you are in the moment when you’re with your buddies, or hanging out with your spouse, or whatever, you will find that life’s a little richer. Heck, it may even make you better at Call of Duty (although this has not been scientifically proven)! But this is a kind of strategy that is used by all sorts of people, including professional athletes, to help them manage unwanted thoughts when they are taking them out of the present moment.

**SLIDE 4: Acronym**

"Now, I know that you get taught A LOT of acronyms...and yes, we’ve got another one for you! This acronym will help you remember the things we talk about in the class today—it’s called RESET for a reason- each letter of RESET will help you remember a principle we cover. Let’s face it—we can’t give you a training without an acronym! But don’t worry—we’ll give you wallet cards so that you don’t have to memorize it and we’ll go over it in more detail later. (Review each letter of RESET)

"Again, I’ll ask you to just keep an open mind as we introduce some of these techniques—they may sound unusual, but they work. These skills will help you train your attention and stay focused when you are under pressure."

"Before we launch into teaching you skills, we’re going to have you do a little exercise that will demonstrate some of the principles of the human mind that we’ll be talking about in class today."
Lemon Exercise

"Everyone close your eyes (or, if you're not comfortable with your eyes closed, just pick a point in front of you on the floor that you can focus your gaze on). During the exercise, I’m going to ask you to keep your eyes closed, and I’ll let you know when it’s time to open them again. Now, imagine that you are holding a lemon in one of your hands. First, just hold that lemon out in front of you and look at it-- imagine what it looks like, all yellow and dimpled on the outside of the peel. Imagine what the lemon feels like in your hand. Now, squeeze the lemon as hard as you can, letting your fingers dig into the flesh of the lemon. Imagine the juice of the lemon running all over your hands, and notice what the flesh of the lemon looks and feels like. Bring the lemon up to your nose, and smell it. Notice what it smells like, and how it feels when that smell hits your nose. Next, imagine taking a bite out of the lemon. Imagine how it tastes and what happens in your mouth as you bite in. Notice the sensations in your mouth, your face puckering as the sour taste hits your tongue. Now, open your eyes."

SLIDE 6

Exercise Processing

"By a show of hands, how many of you could smell the lemon? Maybe your mouth watered? (have folks raise hands).

"We do this exercise at the start of this class because it demonstrates a very important principle about how the human mind works."

"Notice how you interacted with the lemon, notice how the lemon seemed to come to life. You were interacting with it as if it were here, as if lemons were in the room. But what is so interesting is that there aren’t any real lemons here. Our minds seem so powerful because the thought alone made the lemon seem real.

"And many of our thoughts are like that...we interact with them and have responses to thoughts and memories like they are happening right now. But just like the lemon, those thoughts are not really here.

"What’s tricky about thoughts is that, like your thoughts of the lemon, unwanted thoughts tend to pull us in. It’s like we can’t even see that we’re caught up in the thought. One way that we can think about this idea is like being a fish in water."

SLIDE 7

Now, does a fish know that it’s in water? That’s probably a question you’ve never thought about. A fish does not know it is in water, unless it jumps out of the water and is able to look down and see the water."

"Our thoughts are the same way—we often can’t see that we are caught up in our thoughts. There is a way that we can notice our thoughts, but to do that, we have to take a step back and see them for what they are— not facts, just thoughts. Just like the fish in water, we swim around in our thoughts all the time with no idea that we are in them. The purpose of this workshop is to help you jump out of the water— to see the thoughts as they are, rather than swim around in the thoughts with no idea that the thoughts are there. In this way, you can choose where you put your attention. We are going to help you train that attention with the skills we will teach you today."

21
"It’s an unusual technique, but we want to practice popping up out of the water. We’ll drop back in, because this is what minds do...minds have ongoing thoughts that flow like water flows. We want you to be a fish outside the water watching it flow."

**SLIDE 8: Typical Responses to Intrusive Thoughts**

"Before we move on, let’s take a minute and talk about how we typically respond to intrusive or unwanted thoughts".

"Some of you probably have experience with this- say you are laying down, trying to go to sleep, and you start thinking about some unwanted memory. How do you usually react to it? Raise of hands, who tries to push the thought away or just not think about it? Who tries to distract themselves with other activities like watching TV or playing video games? Does anyone tell themselves that you’re being crazy and you should be able to control the thought? Who goes to grab a beer?"

"This is how a lot of people respond to thoughts that they don’t particularly want to have-- they try to push them away and control them. After all, as humans, we have control over a lot of things in our lives, and we often expect ourselves to be able to control our thoughts."

**SLIDE 9: Suppression Exercise**

"But let’s examine what happens when we do try to control our thoughts. Imagine for a moment a jelly donut, all warm and sweet and flaky and squishy. Close your eyes for a moment. Now, whatever you do, for the next 10 seconds, don’t think about the jelly donut. Do not, under any circumstances, allow the jelly donut into your mind."

"Okay, times up. Who was able to successfully push away that thought for the full 10 seconds? And who noticed the thought kept coming back? The truth is that suppression CAN work for brief periods but it does eventually fail."

"To those of you who were able to successfully push away the thought, how did you know that you were being successful? In order to keep something out of your mind, you have to actually keep it in mind to monitor for its appearance. "So, even if you are successful for a brief period of time at blocking out the thought, you eventually have to "check in" to see how you are doing with 'not thinking about jelly donuts' which inevitably leads to thinking about the exact thing you were trying to block out.."

"In fact there is quite a bit of evidence that trying to turn off thoughts may eventually fail."

(You might also want to use the example of "Mary had a little _____” Ask the group to try as hard as they can to not complete the sentence).

"Therefore blocking out thoughts is not the best long term strategy. Sometimes it can work for brief periods, but it will eventually fail. Human beings simply aren’t able to continually suppress thoughts because each time you try, you actually make it harder for yourself to use that strategy."

**SLIDE 10: The Research Evidence**

Many of you have just experienced something that we know to be true from the research – this is a study that illustrates what happens when people try to push away their unwanted thoughts. As you can see, in this study, these individuals were troubled by some fairly
frequent unwanted thoughts at the beginning of the study. Here, they were asked to 
suppress or push away those thoughts. As you can see, that strategy worked a bit. But 
notice that although they had fewer unwanted thoughts when they were actively pushing 
them away, that number didn’t go to zero. And even more interestingly, look what happens 
later on—there was a **rebound effect**—which means that the thoughts not only came back, 
but now they were even more frequent than they were initially!

**SLIDE 11: The Problem of Control**

"The exercise we just did and this research study demonstrate another basic principle about 
how the human mind works. When we have thoughts and feelings that we don’t want to 
have, we often try to just control those experiences."

"We try to push those thoughts away, or cut them off, or distract from them. But when we 
do that, we actually only make the problem worse! Every time we wrestle with trying to turn 
off these thoughts, we make them come back stronger and more frequently."

"But, we keep trying to turn off these thoughts, again and again, because we have trouble 
seeing thoughts for what they are, just thoughts. Remember that we are like fish swimming 
in the thoughts, struggling with them, an unable to see that if we just jumped up from the 
water for a moment, the thoughts just are what they are, separate from us."

**SLIDE 12: The Bottom Line**

This slide is meant to be a point to summarize what we’ve covered so far, make sure 
workshop participants are following/engaging.

“So there are three main take home points we want you to be aware of at this point."

"**First, unwanted thoughts are normal and don’t mean that you are going crazy even 
through it feels like it sometimes. "**

"**Second, thoughts are very tricky and can pull us in and elicit physical sensations and 
emotions we that we might experience in an actual event, even if that event is not 
happening now. Learning to see these thoughts as just thoughts can be helpful."

"**And finally, most people try to suppress or avoid their unwanted thoughts of deployment 
when they happen, but this strategy tends to make them more frequent, intense, or 
compelling.”**

**SLIDE 13: The Alternative to Control: Acceptance**

"Luckily, we know that there is a way to deal with unwanted, intrusive thoughts that does 
not create this problem of more frequent and intense thoughts. We call this strategy 
acceptance."

"The basic idea of acceptance is that you just allow your thoughts to be and observe them 
for what they are, just thoughts, instead of giving into the natural desire to push them 
away. The process of acceptance is like that fish jumping out of the water to look down at it. 
We look at our thoughts and see them as just thoughts."

"In some ways, acceptance is like doing the exact opposite of what you may be naturally 
inclined to do - instead of controlling or getting rid of these thoughts, you let go of that 
internal battle and pick another battle; focus on the here and now. " Imagine that it’s like 
choosing whether or not to play tug-of-war with your thoughts. Instead of tugging harder
you can choose to just not pick up that rope. The thoughts will still be there, but they won’t be as powerful, won’t take up so much energy, and you will be able to see them for what they are: just thoughts that you can notice but don’t need to get sucked into."

**SLIDE 14: Three Strategies**

"Today you’ll learn three strategies for accepting your unwanted thoughts. These are what we’ll call the RESET skills. They are: 1) observing your thoughts, 2) having kindness toward your thoughts, and 3) being larger than your thoughts. " Again, these are strategies that warriors have been training themselves to use for centuries, but they may be new for you. In the next part of this workshop, we will be teaching you each of these three strategies, and we’ll be practicing them together.

**SLIDE 15: Foundation Skill: Mindful Breathing**

"Now, before we start learning these strategies, there is a foundation skill we want you to try. We’ll use this foundation skill in each of the strategies, so we have to practice this one first. The skills is called "mindful breathing."

“Show of hands, has anyone ever heard of mindful breathing? (If hands go up, acknowledge that they may have been taught this previously). It’s actually something that you can think of as a mental strength exercise. It’s like mental pull ups. Everytime you practice mindful breathing, you are flexing a mental muscle that gets stronger and stronger. This is a skill that you can keep coming back to since we are always breathing, this is a skill that is always available to you, no matter where you are. This skill is part of all the other strategies we will teach you—because this skill will be a way to keep yourself grounded and centered. ""Okay, let's give it a try. First, I want everyone to either close your eyes or, if you are not cool with closing your eyes just pick a spot on the floor in front of you to fix your gaze on. Remember, I’ll let you know when it’s time to open your eyes again.

(Deliver this exercise slowly, allowing about 10 seconds between each instruction.) Now, first thing you do is just notice your breathing. Don’t change it, don’t make it different, just notice it. Notice each in breath and each out breath. Notice what it feels like in your body when you breathe in and breathe out. Notice which parts of your body move as you breathe. See if you can notice every aspect of your breathing—see if you can even notice the little urge to breathe in or breathe out that comes right before you actually inhale or exhale. Continue this way for a few moments now, just noticing your breathing.

Now, as you do this, also notice when something pulls you away from observing your breathing. Maybe thoughts leap into your mind about something, or a sound distracts you. Each time this happens, just flex that mental muscle to bring yourself back to the breathing, just shift your attention back to the breath. (conduct this exercise for about 2 minutes)

Okay, time to come back to the room. Open your eyes.

So, you will hear us refer back to this exercise as we cover each of the three RESET skills. It’s a foundation skill because you are always breathing so you can go back to your breath at any time - you can use it as a tool to focus your attention.

**SLIDE 16: Observing Thoughts: Leaves on the Stream** (from Hayes et al., 2003)

"Now that you have tried the foundation skill of breathing, let's practice the first acceptance strategy-- this will help you to practice observing your thoughts. "
Before we start, I think it’s also important to say that just like strength training, it will take time to hone this skill. You might remember when you first started working out, you could only jog short distances or lift very light weights, but over time, you could do more and more. So don’t be disappointed if this seems difficult to do at first...with practice, your mastery of this skill will improve.

"OK. Now let’s get comfortable, once again close your eyes or fix your gaze on the floor in front of you. Now, first, start your mindful breathing—just notice each breath in and each breath out. Come back to your breathing whenever you need to get centered. Imagine that you are standing at the bank of a peaceful, flowing stream. Now, imagine that there are a bunch of leaves gathered by the bank of the stream. You are standing on the bank watching as the current continuously pulls the leaves one-by-one into the gentle flow downstream. As the leaves become part of the flow, practice observing your thoughts by putting each thought you have in the center of a leaf. (Pause)"

"Just watch the stream carry the leaves away with your thoughts on them. As you do this, notice that sometimes the leaves will stop, or you will leave the bank or interrupt the flow of the stream. Or, sometimes this exercise will disappear from your mind completely. If that happens, just notice that the thoughts have pulled you in, or that you are struggling with the thoughts, and return to the bank, letting the leaves flow by again. Just keep putting thoughts on leaves. (Pause)"

"The main thing is to notice when they stop for any reason and see whether you can catch what happened right before they stopped. (Pause)"

"If the leaves aren't flowing at all and you start thinking, 'It’s not working,' or 'I’m not doing it right,' then let that thought appear on a leaf, too. (Pause)"

[Allow SMs to work on this exercise for about 2 minutes, prompting every 15 seconds or so]

"When you're ready, open your eyes and come back to this room."

**SLIDE 17: Exercise Processing**

"By a show of hands, who was able to put any of your thoughts on leaves?"

"The main idea is to just observe your thoughts; let them flow without trying to control them, or get rid of them, or struggle with them."

**SLIDE 18: Important Point: Non-Judgment**

"Did anyone notice themselves putting labels on their thoughts during this exercise? Like, telling yourself that a thought is a bad thought or a good thought?"

"If you do this, this is a pretty normal experience—our minds like to put our experiences into categories, so we have a tendency to judge whatever it is we encounter. And we do this all the time with our internal experiences- our thoughts, feelings, and emotions."

"But, it doesn't really help us to judge our thoughts- they just are what they are and we don't have a ton of control over them. Spending time and effort judging your thoughts wastes your most important resource – your mental energy."
"Observing your thoughts without judging them is another part of acceptance. When we practice this, we practice watching our thoughts, and seeing them just as they are, mental events, rather than something good, or bad, that we need to push away or hold on to. This saves our mental energy so that we can focus on the things that are most important to us."

**SLIDE 19: Non-Judgment of Thoughts: Kindness Meditation**

"This is an exercise that can help you practice the technique of non-judgment with your thoughts. It helps you to try to have non-judging reactions to thoughts that you would normally judge."

"Close your eyes or fix your gaze. Now, first, start your mindful breathing—just notice each breath in and each breath out. Come back to your breathing whenever you need to get centered. Now, imagine in your mind’s eye someone who you care deeply about; someone whose image naturally invites a feeling of love and caring. This may be a friend, a family member, a child, a pet, a fellow Soldier, or anyone else for whom you feel caring and kindness for. When you have this person or animal in mind, who is nearest to your heart, see how much you care for them, notice what it is about them that draws you near; notice how you hold them in your heart." (pause)

"Now, notice that they too have their own struggles in life. Notice, that at times, they too struggle with difficult thoughts…that they too get burdened by images, memories and judgments. When that person is in this difficulty, feel how your heart naturally opens, moving toward him or her to extend comfort, to offer kindness in response to the difficulty – to meet it with kindness and comfort." (pause)

"After you experience your deep caring for this person close to you, turn this kindness and comfort—this compassion—toward yourself. Take a moment and notice your own struggles…be aware that, at times, you are visited by difficult thoughts…burdensome images and memories…notice your own struggle in these places….see, if you can, as a choice, extend comfort to yourself in the midst of these experiences….allow your heart to naturally open to them….notice how you can show concern and comfort….how you can meet this difficulty with kindness….take a few moments and let yourself rest in this open place….this place where your greet yourself with comfort and kindness….allow time for this to 'sink' in)."

"Try this for just a few moments, allowing yourself to open up and offer comfort and kindness toward your own struggles or difficult thoughts. (Pause)"

"When you are ready, open your eyes."

**SLIDE 20: Exercise Processing**

"Could you experience that feeling of comfort and kindness toward yourself and your thoughts?"

"The point of this exercise is to just practice bringing kindness to our own measure of suffering, just like we would to a loved one. Many people have a hard time with this one – because it is easier to have good thoughts for others than for yourself- if that sounds like you, then this is a good skill for you to practice with at home so that you can learn to be decent toward yourself. When you spend your time and energy beating yourself yup, this takes away from the things that are most important to you because being mean toward yourself just uses up your mental energy."

**SLIDE 21: Final Point: You Are Not Your Thoughts**
"Now that you’ve practiced observing your thoughts non-judgmentally, hopefully you have had a few moments when you’ve started to notice a little bit of space between yourself and your thoughts. In a way you are like being a fish jumping out of the water and just observing that the water is there— not good or bad, but just there. This is another tricky part about thoughts—they not only hook us in and have us believing they are really happening, but since we can’t see that we are in the thoughts we think the thoughts are ‘us,’ that somehow are thoughts are ourselves."

"But notice that our internal experiences, our thoughts, sensations, and emotions change constantly. Notice how many times your thoughts have changed even as you came into this room! And, as you notice this, notice that ‘you’—the person noticing all of these changes, has not changed. Sometimes we forget that there is a person behind our eyes that is separate from our thoughts, that can have thoughts but is not made of just our thoughts."

"You are someone who has thoughts, not someone who is thoughts."

**SLIDE 22: Being Larger Than Your Thoughts: The Mountain Meditation (from Kabat-Zinn)**

"We’ll do one last exercise today to demonstrate this point—that we are not our thoughts, our emotions, our sensations. We are larger than our thoughts and feelings…"

"Once again now, first, just close your eyes, or fix your gaze on something, and breathe in and out. As we move through this exercise, use your breath as an anchor—if you find your mind wandering just come back to your breath and then back to the exercise."

"Picture the most beautiful mountain you know or know of or can imagine, one whose form speaks personally to you. As you focus on the image or the feeling of the mountain in your mind’s eye, notice its overall shape, the lofty peak, the base rooted in the rock of the earth’s crust. Note as well how massive it is, how unmoving." *(PAUSE)*

"When you feel ready, see if you can bring the mountain into your own body so that your body sitting here and the mountain of the mind’s eye become one. Your head becomes the lofty peak; your shoulders and arms the sides of the mountain; your buttocks and legs the solid base rooted to your cushion on the floor or to your chair. Experience in your body the sense of uplift, the elevated quality of the mountain deep in your own spine. Invite yourself to become a breathing mountain, unwavering in your stillness, completely what you are—beyond words and thought, a centered, rooted, unmoving presence."

"Now, notice that a mountain endures many changes. Over the course of a day, the sun moves across the sky, but its all the same to the mountain. The seasons change, just like thoughts will be constantly changing, but underneath it all the mountain remains the same. Sometimes the mountain is buffeted by intense storms—wind and rain, snow and ice, and sometimes the skies around the mountain are clear. But the mountain sits, unchanged by the weather around it. It does not struggle against this weather, the mountain cannot change the weather. Just like you can sit and the thoughts will come and go. The mountain sits, and the storms pass (they will come again), and it continues to be the mountain, despite the weather."

"We, too, experience storms. Stormy thoughts and feelings, sometimes of unthinkable intensity. But, like the mountain, we needn’t try to change the weather. Stormy thoughts and feelings will come, and pass, skies will clear again. Experience a feeling of strength, and calm, a mountain amid the storms, unmoved by the weather of stormy thoughts. As light and weather and fog all change around us, we remain constant, like the mountain."
Notice what it feels like to connect to the feeling of sameness, stability in the mountain, despite what thoughts or feelings come and go.” (PAUSE)

Conduct this exercise for 2 minutes...then instruct them to open eyes and come back to the room when they are ready.

**SLIDE 23: Exercise Processing**

"Could you experience that feeling of stability in the mountain?"

"The point of this exercise is to practice being larger than our thoughts; noticing that we have thoughts, but that thoughts are not who we are. We can have all kinds of thoughts but remain stable and solid despite them"

**SLIDE 24: Practicing with Deployment Thoughts**

"Now that you have learned several strategies for approaching intrusive thoughts, we would like you to practice one of them with the most frequent thought about deployment that you identified earlier. You can choose which strategy you would like to practice: practicing mindful breathing, watching the thoughts on leaves, bringing kindness and comfort to your thoughts, like we would for a loved one or pet, or you can practice observing yourself as a mountain as the deployment thoughts swirl around. For the next two minutes, intentionally think about your distressing thought that you identified earlier, and then practice one of these skills you have learned. I will ask you to start with the thought that you selected as your identified thought, but you may find that your mind moves onto other related...or even unrelated thoughts...and that’s ok. Just so long as you start out with the thought that you identified in your packet of measures (hold up the page where they were asked to write the identified thought). Take a moment to think about which strategy you would like to practice (mindful breathing, leaves on a stream, kindness/compassionate thinking or being a mountain)."

“Ready? OK, you can start now, and we’ll tell you when the exercise is over.”

Allow SM’s to practice for ~2 minutes. At the end of the two minutes, prompt them to open their eyes and return to the room.

**SLIDE 25**

**3) Post-RESET Assessment**

Instruct SM’s to complete the post-workshop measures: **SUDS, PANAS, PHLMS-R, AAQ-II, EIS, ETO and QUIZ:**

"Now go ahead and turn to the next page in your workbook. While you complete these short surveys, we would like you to keep in mind the thought you were just practicing managing. Then when everyone finishes with these we can wrap up the workshop. If you finish before your peers, please take a moment to review that you’ve answered all items in this section of the workbook.”"

**SLIDE 26: Practicing Acceptance in Your Life**

"Now, you’ve learned the RESET skills that you can use, but let’s talk a little bit about how you can practice them in your actual life.
You might be thinking to yourself, "Why is practice important? I can just plan to use these skills when I’m having a bad day.” But in order to have these skills trained up and ready to go, you’ll need to do some practice ahead of time to train your mind. That way these skills will be ready for you when you need them. You don’t just get up one day and say “I think I will run a marathon today” you need to train to do that and these skills work the same way. One way to practice them is by actually setting aside time to do these exercises. We’ll be giving you some audio CDs and other materials today so that you can do this. Just like any kind of physical training, the more you use the muscle the better it works. Now, each of these exercises takes 5 minutes or less. Truly, it would be great if you could do two or three exercises a day; that would be ideal (so that’s just 10-15 minutes of daily practice). But, we know you’re busy and have lots of other things going on, so even if you could do one exercise, that’s 5 minutes or less a day, you will still be getting enough training to see real changes.”

Remind SMs that we will be asking about their practice as part of the follow up measures

“But, you can also incorporate these strategies into your daily life. So, say you are at work and you start noticing some kind of unwanted thoughts popping up—you can start bringing in these strategies even as you’re doing whatever you’re doing; maybe you just start observing your thoughts as they come.”

“Or, you can also take a little break to try these strategies. So, you can even say to your coworkers, I need a minute to go “RESET.” And then maybe just spend a short few moments, it doesn’t have to be a long time, to practice.”

“Finally, there are other things you can do to help you manage these thoughts, even as you practice these new strategies. For example, remember that you can always talk to your battle buddies about deployment thoughts. Or, you can try keeping a journal where you write down the thoughts that are coming up for you. These are in line with the principle of acceptance—they more effective strategies than trying to just suppress the thoughts. And there are other things that can help you keep your mental muscles strong—like exercising regularly, utilizing spirituality, refraining from drugs, and moderating your alcohol use.”

**SLIDE 27: Acronym & Wrapping up**

As you summarize the workshop, be sure to highlight three key points – 1) that unwanted thoughts are normal after deployment, 2) that attempts to control, avoid, or suppress these thoughts not only doesn’t help but may make things worse, and 3) that mindful, non judging acceptance is the best strategy for dealing with the thoughts

Review the workshop and introduce the RESET acronym to help participants remember what they have learned. The RESET acronym is:

**R**emember it is normal to have intrusive or unwanted thoughts.

**E**ase-up on control, it doesn’t always work well with thoughts.

**S**ee & accept your thoughts: You are more than just your thoughts.

**E**xperience thoughts as they happen: Don’t judge them.

**T**rain your skills: Practice is important!
As you are introducing the RESET acronym, distribute the reminder wallet card with RESET acronym. Distribute the audio CD with practice exercises. Elicit questions from SMs about the ideas and strategies that you covered today.

**SLIDE 28: Thank You**

Thank the audience again for their time, attention, and service to our country.

Remind participants that they will be receiving a call from study staff in 2 weeks to verify their address. About 2 weeks after that, they will be receiving a packet of follow up questionnaires in the mail. Let SM’s know that it should not take more than 1 hour of their time to complete the questionnaires and encourage SM’s to complete the questionnaires as soon as possible after receiving them. Let them know that they can return the questionnaires to the research team in the postage paid envelope that will be provided. Remind them that everyone who returns their completed packet will be entered into a drawing for a prize.

Provide exiting participants with their gift card for $100.00.

Let SMs know that you'll be around to talk with them about any questions or concerns following this training.
Comments from 10th Mtn. Soldiers about the RESET Training:

“I was actually having fun!”

“I’ve never done anything like it, never seen anything like it…it’s definitely new and different”

“Hey, we did this…and you should really try it!”

“This is great.”

“You have a great product here…easy to understand…should be offered to all Soldiers”

“(RESET) will improve the lives of my Soldiers”
RESET TRAINING
RESET TRAINING

What’s In It For Me?

= ☀️

(call of duty black ops) (maybe!)
RESET 

Remember it is normal to have intrusive or unwanted thoughts. Ease up on control, it doesn’t always work well with thoughts. See & accept your thoughts: You are more than just your thoughts. Experience thoughts as they happen: Don’t judge them. Train your skills: Practice is important!
RESET TRAINING

TRAINING EXERCISE: LEMON
• Could you smell/taste the lemon? Did your mouth water?

• There are NO LEMONS in the room...only THOUGHTS of lemons

• Thoughts can feel real
RESET TRAINING
TYPICAL RESPONSES TO UNWANTED THOUGHTS:

- **Suppression**
  - Pushing the thought away
  - Trying not to think about the thought

- **Distraction**
  - Watching TV
  - Playing video games

- **Judgment**
  - “Something is wrong with me.”
  - “Am I crazy for thinking this?”
TRAINING EXERCISE:
SUPPRESSION
% Suppressed Thought

Initial | Suppression | After Suppression

THE PROBLEM OF CONTROL

• Attempts to control increase the frequency, intensity of thoughts
THE BOTTOM LINE

- Unwanted thoughts are a normal experience post-deployment
- Thoughts are tricky; they can pull us in and result in physical sensations and emotions
- Attempts to suppress/avoid thoughts usually don’t work
RESET TRAINING

THE ALTERNATIVE TO CONTROL: ACCEPTANCE

- Allowing, observing thoughts without judgment
THREE ACCEPTANCE STRATEGIES

• Observing Thoughts
• Non-Judgment of Thoughts
• Being Larger Than Your Thoughts
RESET TRAINING

FOUNDATION SKILL: MINDFUL BREATHING
OBSERVING THOUGHTS:
LEAVES ON A STREAM
• Were you able to put your thoughts on leaves?

• **Being able to notice your thoughts** is progress, even if you struggle with the leaves on a stream.

• Did anyone notice themselves think “this is silly” or “I can’t do this”?
IMPORTANT POINT: NON-JUDGMENT
RESET TRAINING

NON-JUDGMENT OF THOUGHTS: KINDNESS MEDITATION
RESET TRAINING

• Could you generate the feeling of kindness for someone else?

• Could you treat your own thoughts with comfort or kindness?
RESET TRAINING

YOU ARE NOT YOUR THOUGHTS
RESET TRAINING

BEING LARGER THAN YOUR THOUGHTS:
THE MOUNTAIN EXERCISE
• Were you able to capture the **stability of the mountain**?

• You are larger than just your thoughts
PRACTICING WITH DEPLOYMENT THOUGHTS

- Mindful breathing: Foundation Skill
- Observing Thoughts: Leaves on the Stream
- Non-Judgment of Thoughts: Kindness Meditation
- Being Larger Than Thoughts: Mountain Exercise
RESET TRAINING

MEASURES

• While you complete these, **keep in mind the thought about your most recent deployment** that you were practicing managing.

• This is the unwanted thought that you had identified as most frequently coming into your mind over the past month.
PRACTICING ACCEPTANCE IN YOUR LIFE

• Why is it important to practice?
• Set aside time to practice—even just 5 minutes a day!
• Incorporate skills into daily life
• Take a minute to RESET
• Talk to your buddies, keep a journal
• Healthy living: exercise regularly, utilize spirituality, refrain from drugs, use alcohol only in moderation
KEY POINTS

• Unwanted thoughts are a normal experience post-deployment
• Attempts to control, avoid, or suppress these thoughts doesn’t work—it only makes the problem worse
• Mindful, non-judging acceptance is the best strategy for dealing with unwanted thoughts
Remember it is normal to have intrusive or unwanted thoughts.
Ease up on control, it doesn’t always work well with thoughts.
See & accept your thoughts: You are more than just your thoughts.
Experience thoughts as they happen: Don’t judge them.
Train your skills: Practice is important!
Thank you for your time, and for your service to our country.
CONTROL TRAINING

Comments from 10th Mtn. Soldiers about the CONTROL Training:

“I enjoyed it, I really did…I am going to tell my buddy about it”

“I think the skills are good”

“Personally, I could pass it (CONTROL training) on to one of my Soldiers”

“Overall, I thought the training was very good, it actually worked and I’m an infantry Soldier…they’re going to step into this and say this is not gonna work…but I think this will work for them”

“I particularly like the interactive portions of the training and think it will be well received …”

“Thank you for taking the time to create a good training program”
CONTROL TRAINING

What’s In It For Me?

= [Image of a brain lifting weights] [Image of Call of Duty Black Ops]

(maybe!)
CONTROL TRAINING

CONTROL

Common intrusive or unwanted thoughts affect almost everyone

Only you can learn to control them

New skills can help you

Thoughts can be stopped

Replace your thoughts with more pleasant ones

Other activities will help distract you

Learning comes with practice: Train your skills!
CONTROL TRAINING

STRATEGIES FOR MANAGING UNWANTED THOUGHTS:

• Thought Stopping
  – Interrupt the thought and make it go away

• Thought Replacing
  – Make a positive statement to replace the negative

• Distracting
  – Do something else
CONTROL TRAINING

CONTROL TRAINING

THOUGHT STOPPING

YELL

THINK

SEE

FEEL
TRAINING EXERCISE: THOUGHT STOPPING YELL “STOP”
CONTROL TRAINING

- Were you able to stop the thoughts?
CONTROL TRAINING

THOUGHT STOPPING
QUIETTER VERSIONS:

THINK

SEE
TRAINING EXERCISE: THOUGHT STOPPING
FEEL “STOP”
CONTROL TRAINING
• Were you able to stop the thoughts?
CONTROL TRAINING

THOUGHT REPLACING
CONTROL TRAINING

TRAINING EXERCISE:
THOUGHT REPLACING
• Were you able to replace the thoughts with more pleasant thoughts?
CONTROL TRAINING

DISTRACTING
CONTROL TRAINING

DISTRACTIONS

- Exercise
- Crosswords/Sudoku
- Cleaning the House
- Playing with Kids or Pet
- Talking to a Buddy
- Make a “To Do” List

- Watching TV
- Listening to Music
- Playing Video Games
- Going for a Drive
- Taking a Relaxing Bath
- Flip though Magazines
CONTROL TRAINING

PRACTICING WITH DEPLOYMENT THOUGHTS

• Thought Stopping - Think, See, or Feel “Stop”

• Thought Replacement

• Distraction
While you complete these, keep in mind the thought about your most recent deployment that you were practicing managing.

This is the intrusive thought that you had identified as most frequently coming into your mind over the past month.
PRACTICING CONTROL IN YOUR LIFE

- Why is it important to practice?
- Set aside time to practice—even just 5 minutes a day!
- Incorporate skills into daily life
- Take a minute to get CONTROL
- Talk to your buddies, keep a journal
- Healthy living: exercise regularly, utilize spirituality, refrain from drugs, use alcohol only in moderation
Common intrusive or unwanted thoughts affect almost everyone
Only you can learn to control them
New skills can help you
Thoughts can be stopped
Replace your thoughts with more pleasant ones
Other activities will help distract you
Learning comes with practice: Train your skills!
Thank you for your time, and for your service to our country.
INTRUSIVE OR UNWANTED THOUGHTS TRAINING
Introduction

• What are intrusive thoughts?
• Training exercise
• Intrusive thoughts are normal
• Common reactions to intrusive thoughts
• Seeking help for intrusive thoughts
What are intrusive or unwanted thoughts?

Thoughts, memories, or images about any stressful experience, including deployment, that can pop into your mind repeatedly.

Often these thoughts are annoying, and they might make it harder for you to concentrate or hard for you to get things done.
Mary had a little ______________.
INTRUSIVE OR UNWANTED THOUGHTS TRAINING
INTRUSIVE OR UNWANTED THOUGHTS TRAINING

UNWANTED DEPLOYMENT THOUGHTS
The majority of service members report having thoughts of their deployment.

Unwanted thoughts are a common experience.

Unwanted thoughts do NOT mean you are “going crazy”.
INTRUSIVE OR UNWANTED THOUGHTS TRAINING

COMMON UNWANTED THOUGHTS

Deployment-related:

• Something you saw
• Something you heard
• Something you smelled
• Things that happened (to you or to friends)
• Things you heard about

Other common thoughts:

• A bad day you had
• A mistake you made
• Relationship problems
• Finances
• Health
• Concerns about the future
COMMON REACTIONS

Emotion-based Reactions

- Anger
- Guilt
- Sadness
- Frustration
- Feeling hopeless/helpless
COMMON REACTIONS

Physical Reactions

- Racing heartbeat
- Feelings of anticipation
  - Anxiety
- Upset stomach
- Sweaty palms
INTRUSIVE OR UNWANTED THOUGHTS TRAINING

WHEN THOUGHTS CAUSE STRESS

FOR EXAMPLE

- Hard time focusing attention at work
- Distracted from enjoying time with friends and family
- Sleep problems
- Use of alcohol or drugs to cope
- Feeling overwhelmed
INTRUSIVE OR UNWANTED THOUGHTS TRAINING

WHAT TO DO

• Talk to your buddies, keep a journal
• Healthy living: exercise regularly, utilize spirituality, refrain from drugs, use alcohol only in moderation
• Seek assistance:
  
  Fort Drum Behavioral Health
  315-772-2778
  Watertown VA Outpatient Clinic
  1-800-310-5001
  Military One Source (24 hours)
  1-800-342-9647
  Samaritan Medical Center-Watertown
  315-785-4516
WRAP UP

• Intrusive or unwanted thoughts are common and normal after deployments or any other stressful experience
• Physical and emotion-based reactions to intrusive thoughts can happen
• If these thoughts cause difficulty in your life you can seek help
Thank you for your time, and for your service to our country.
• While you complete these, keep in mind the thought about your most recent deployment that you identified earlier in your visit.

• This is the unwanted thought that you had identified as most frequently coming into your mind over the past month.
# SCHEDULE OF EVENTS—PHASE 2

<table>
<thead>
<tr>
<th>Measure</th>
<th>Construct measured</th>
<th>Baseline</th>
<th>Pre/Post (PIT, RESET, CONTROL)</th>
<th>1 Month Follow Up (mailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pre</td>
<td>Post</td>
</tr>
<tr>
<td>Demographics (DEM)</td>
<td>Demographic data</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deployment Risk and Resilience Inventory (DRRI)</td>
<td>Deployment-related risk and resilience</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTSD Checklist (PCL)</td>
<td>Self-reported PTSD</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Thought Control Questionnaire (TCQ)</td>
<td>Coping strategies for unwanted thoughts</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Coping Inventory for Stressful Situations-Short (CISS-21)</td>
<td>Coping strategies</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Self-Compassion Scale (SCS)</td>
<td>Self-compassion</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Five Facet Mindfulness Questionnaire (FFMQ)</td>
<td>Mindfulness</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Depression Anxiety Stress Scales-21 (DASS-21)</td>
<td>Depression and anxiety</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Patient Health Questionnaire (PHQ) Health, Stress, and Alcohol Use subscales</td>
<td>Quality of life</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Measure</td>
<td>Construct Measured</td>
<td>Baseline (ALL)</td>
<td>Pre/Post (PIT, RESET, CONTROL)</td>
<td>1 Month Follow Up Mailed (ALL)</td>
</tr>
<tr>
<td>---------</td>
<td>-------------------</td>
<td>---------------</td>
<td>-------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pre</td>
<td>Post</td>
</tr>
<tr>
<td>Posttraumatic Maladaptive Beliefs Scale (PMBS)</td>
<td>Posttraumatic Maladaptive Beliefs</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insomnia Severity Index (ISI)</td>
<td>Sleep</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Experience of Intrusion Scale (EIS)</td>
<td>Deployment-related intrusive thoughts</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Philadelphia Mindfulness Scale-Revised (PHLMS-R)</td>
<td>Responses to intrusive thoughts; mindfulness</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Subjective Units of Distress Scale (SUDS)</td>
<td>Subjective distress</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Positive and Negative Affect Scale (PANAS)</td>
<td>Current mood state</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Acceptance and Action Questionnaire II (AAQ-II)</td>
<td>Experiential avoidance</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Expectancy of Therapeutic Outcome (ETO)</td>
<td>Expectancy of therapeutic outcome</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Post-training Quiz</td>
<td>Understanding of information presented</td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>