

Building a high quality Mentor Program for Veteran's Treatment Court

Illinois 11th Judicial Circuit
Veterans Treatment Court
Bloomington, Illinois

October 20th 2022 3:15 to 4:45



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- ▶ Who is a Veteran in this room? 2.5 Million Americans served in the current conflict.
- ▶ **Thank you for your Service!**

My Background

- ▶ Retired US Army 27 years of service.
- ▶ Two deployments with Special Forces and one deployment with Infantry, all three in Afghanistan (Dec 2001 to Dec 2003, 2005, 2008).
- ▶ Masters Degree in Business Administration from Northern Illinois.
- ▶ Currently work at 11th Judicial Circuit Veterans Treatment Court in Bloomington as the Mentor Coordinator.



Honorable Judge Charles Feeney

- ▶ Marine
 - ▶ Judge Advocate General Active Duty.
 - ▶ 20 years in the Marine Corp Reserves.
- ▶ Two Rules for the Veterans
 - ▶ **Be where you're supposed to be when you're supposed to be there.**
 - ▶ **Be honest.**
- ▶ Our program is focused on treatment of high risk Veterans.



Learning Objectives

- ▶ Learning Obj 1. Veteran Treatment Court laws
- ▶ Learning Obj 2. Veteran family and military support structures
- ▶ Learning Obj 3. How mentors fit into the SAMSHA intercept model
- ▶ Learning Obj 4. Current evidence based practices
- ▶ Learning Obj 5. 11th Judicial Veterans Treatment Court Program
- ▶ Learning Obj 6. Types of Military Trauma
- ▶ Learning Obj 7. Tips for building success
- ▶ Learning Obj 8. Meet our mentors

Definitions

- ▶ **Mentor.** A veteran that serves in the role of recovery coach.
- ▶ **Veteran.** A veteran that is justice involved. I don't use the words client or mentee. The word veteran implies a higher set of values learned in their military service: duty, honor, integrity.
- ▶ **Combat Post Traumatic Stress Disorder (PTSD).** Any service that is war time related trauma.
- ▶ **Traumatic Brain Injuries (TBI).** Any physical damage to the brain from impact.
- ▶ **Military Sexual Trauma (MST).** Sexual harassment or sexual assaults that occur while in the military service.

Veteran Treatment Court Coordination Act of 2019

- ▶ SECTION 1. SHORT TITLE.
- ▶ This Act may be cited as the “Veteran Treatment Court Coordination Act of 2019”.
- ▶ SEC. 2. SENSE OF CONGRESS.
- ▶ It is the sense of Congress that veterans treatment courts are a successful program aimed at helping veterans charged with nonviolent crimes receive the help and the benefits for which the veterans are entitled.

Illinois Veterans and Servicemembers Court Treatment Act.

- ▶ **(730 ILCS 167/25)**
- ▶ Sec. 25. Procedure.
- ▶ (f) The Court may establish a mentorship program that provides access and support to program participants by peer recovery coaches. Courts shall be responsible to administer the mentorship program with the support of volunteer veterans and local veteran service organizations, including a VAC. Peer recovery coaches shall be trained and certified by the Court prior to being assigned to participants in the program.
- ▶ New changes to this law in June 2022.

Opening Research

“Research shows that contentious post-deployment interactions with civilian family members are linked with poor mental health outcomes. However, supportive and emotionally intimate civilian family interactions with the returning veteran seem to protect against mental health problems. Family therapy sessions that include both the veteran and his or her family have been shown to successfully improve returning veterans’ mental health outcomes. Just as spouse and family member relationships provide positive mental health benefits for veterans, so, too, do military relationships.” (Hinojosa, 2011)

Four Subcategories of Military Friendship

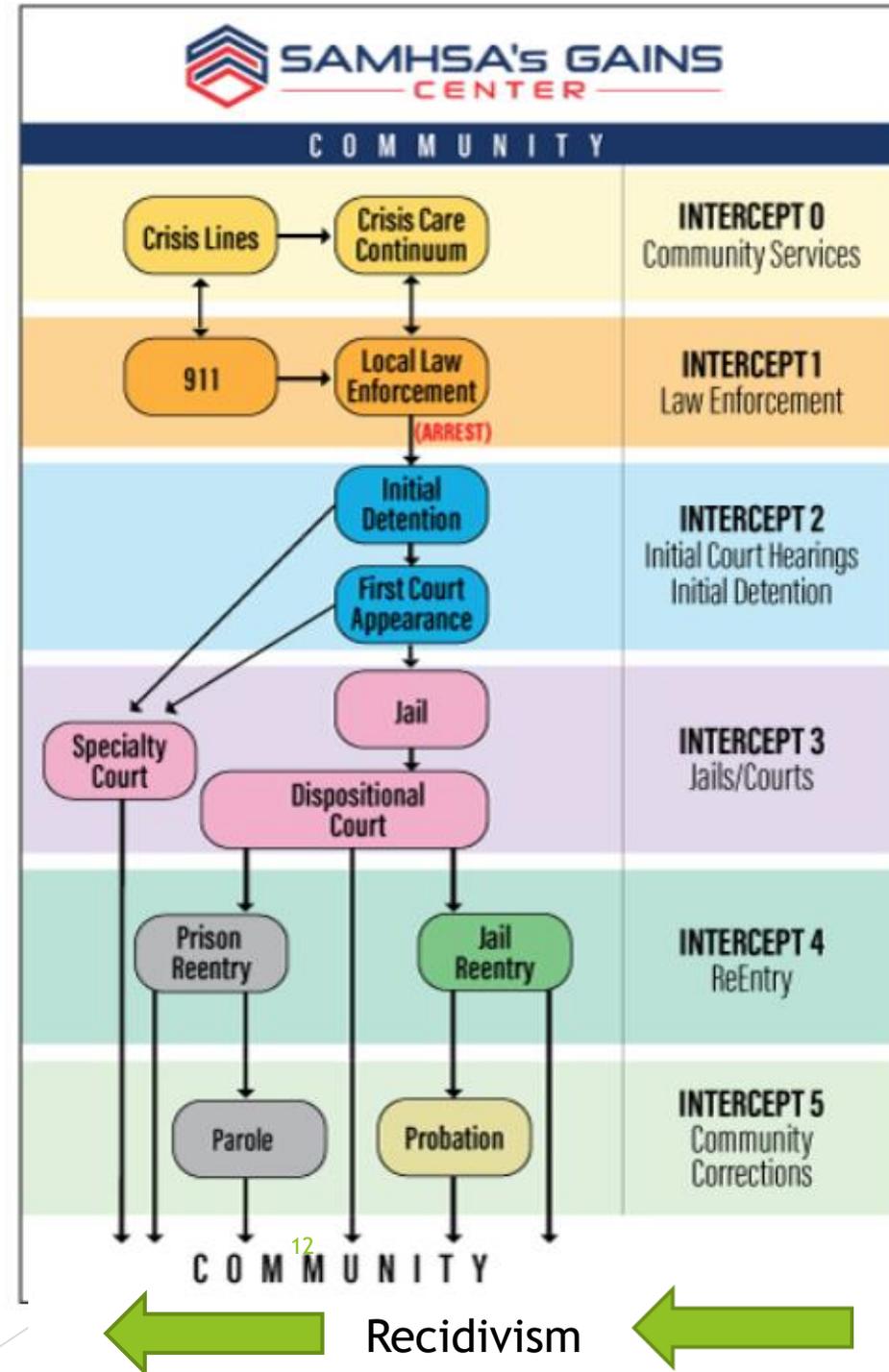
- ▶ Transition to War
 - ▶ **Anticipation-** Veteran looks forward to deployment.
 - ▶ **Combat Awakening-** Realization of being in a combat zone.
 - ▶ **Loss of Family-** Veteran feels impact of less support.
- ▶ Growth of the Military Family
 - ▶ **Recreation-** Relaxing activities to distress overseas.
 - ▶ **Emotional Intimacy-** One or Two close connections.
- ▶ Reintegration
 - ▶ **Hanging On-** Trying to maintain military connections after redeploy.
 - ▶ **Loss of the Military Family-** Realization that military family is not present.
- ▶ Seeking to reconnect with the military family.
 - ▶ **Informal Settings-** Connecting with other Service members.
 - ▶ **Formal Settings-** Reconnecting in the guard or reserves, VA groups.
- ▶ (Hinojosa, 2011)

Veteran Isolation Roots

- ▶ Often leave family at 18 years old.
- ▶ Military changes jobs and locations every two to four years. Most Veterans learn to quickly make friends or teams with people.
- ▶ Many deployed military personnel return to a home life where they are neither viewed as military members nor as a “complete” family member. (Hinojosa and Hinojosa, 2011).
- ▶ Taught by military to be self-sufficient.
- ▶ Hyper masculine culture. Female Veterans can also display Alpha-male type personalities: Competitive, strive to be the best, direct. Meyers Briggs personalities in the military lean toward Thinking and Judging.
- ▶ Learning through war stories. New recruits learn their jobs in combat from other military members that have been in combat. This makes mentoring Veterans easier because they are used to learning verbally from others.
- ▶ Veterans “may have been subjected, even repeatedly subjected, to **life threatening events the general public may never know**” (Hawkins, 2009).¹

SAMSHA Intercept Model

- ▶ **Intercept 0.** Mentors connect with local, state and federal services and network with people. Mentors maintain healthy mental health.
- ▶ **Intercept 1.** Veterans or family members of Veterans in crisis contact other Veterans. Mentors in these Veteran Organizations know about arrests because of the networking, not because of confidentiality issues. When a Non-Mentor Veterans contacts VTC, VTC team should ask them to be a Mentor to the Veteran.
- ▶ **Intercept 2.** Mentors are fantastic at assisting prior to first court hearing and getting Veteran to see benefits of rehab and/or treatment. Probation officers don't talk to Veterans before case is assigned and Public Defenders don't have time to educate and convince a Veteran to use VTC. Mentors start leading Veterans to buy-in vs. avoiding jail.
- ▶ **Intercept 3.** Mentors continue working on the motivation and resource requests from the Veteran.
- ▶ **Intercept 4.** Mentors work to keep Veterans from dropping out of the program when life gets tough and/or treatment seems too hard. Veterans work to stabilize housing, jobs, and/or education.
- ▶ **Intercept 5.** Mentors help Veterans maintain social connections and Veterans can later become Mentors.
- ▶ Mentors help shift recidivism left of bang.
- ▶ <https://www.samhsa.gov/criminal-juvenile-justice/sim-overview>



Evidence Based Mentor Recovery

- ▶ Veteran specific criminogenic (Blonigen, 2016).
 - ▶ **Combat exposure.**
 - ▶ **PTSD.**
 - ▶ **Traumatic Brain Injury.**
- ▶ Peer providers serve to motivate and empower the individual, guiding the recovery process and supporting the individual's goals and decisions (Hawkins, 2009).
 - ▶ **Emotional.**
 - ▶ **Motivational.**
 - ▶ **Informational (skill building).**
 - ▶ **Instrumental (assistance with specific needs).**
 - ▶ **Affiliational (social connectedness and inclusion).**
- ▶ Successful rehabilitative programs (Bonta & Andrews, 2016).
 - ▶ **Employment.**
 - ▶ **Education.**
 - ▶ **Addiction Management.**
 - ▶ **Prosocial Activities including family involvement.**

Five Factors of Mentor Intervention (Rowe, 2015).

1. Early Intervention

1. Maximizing the time a mentor and client can work together.
2. Orienting the mentor to a client's baseline functioning to better gauge progress.
3. Facilitating a client's early contact's with family members for support.

2. Relationship quality; communicating empathetic understanding, affinity and authenticity.

3. Promoting criminal desistance by explicitly noting mentorship is structured by the veteran's parole.

4. Mentorship facilitated navigation of social nuances and ruptures in support from family and friends, often promoting complex deliberations of each relationships value vs demands.

5. Mentorship fosters citizenship, defined as the perceived value of one's participation stemming from self and others, and connections to societal resources, close relationships, and a community life punctuated by meaningful associations.

Utilizing Peer mentorship to Engage High Recidivism Substance-Abusing Patients in Treatment (Tracy, Burton, Nich and Rounsaville, 2011).

- ▶ Providing family members of Veterans with psychoeducational skills training to bolster support for Veteran needs.
- ▶ Many treatments are **highly staff dependent**.
- ▶ Veterans have difficulty engaging with staff or fully agreeing with treatment team goals resulting in less motivation to continue their care.
- ▶ Veterans with poor emotional and social skills experience difficulty in relating to others; ultimately leading to reliance on substances.
- ▶ One way to increase engagement in outpatient treatment is through the utilization of peers during inpatient stay and follow up to mitigate against some of the patients issues in the treatment while concurrently reducing reliance on staff resources.

Peer support for persons with co-occurring disorders and community tenure: a survival analysis (Min SY, Whitecraft J, Rothbard AB, 2007).

- ▶ 484 people with co-occurring serious mental illness and substance use disorders who had been hospitalized in the prior 2 years
- ▶ **FC (Friends Connection) paired consumers one to one with peers for community activities, recreation, and self-help; aimed to enhance social network and social support.** Peers were abstinent ≥ 3 years and successfully coping with their mental health issues.
- ▶ **Rehospitalization patterns were significantly different. FC participants had a higher overall probability of remaining in the community.**

When a Veterans' Treatment Court Fails: Lessons Learned from a Qualitative Evaluation (Douds & Hummer, 2019).

- ▶ Study is a result of a Veteran that committed suicide in last phase of VTC.
- ▶ Given that 20-32% of veterans report one or more problems with drug or alcohol abuse (Lan et al., 2016), and half of all incarcerated veterans indicated substance use at the time of the offense for which they were convicted (Tsai, Rosenheck, Kasproy, & McGuire, 2013).
- ▶ **Veterans accounted for 8% of all inmates in state and federal prisons and local jails** decreased consistently ever since the Vietnam era at 19% (Bronson et al., 2015).
- ▶ Preliminary information has indicated that **mentoring enhances the recovery process for mentors themselves**, primarily by allowing mentors to focus on the recovery of others and remaining engaged with resources that help maintain their own recovery (Dugdale et al., 2016).
- ▶ **Final desistance is frequently achieved after several tries, and individual failures cannot be construed as programmatic failure.** In sponsoring relationships, both those who are sponsored and those doing the sponsoring sometimes relapse, and a **“layered” approach to mentorship acts as a safety net.** What is most important is for there to be a plan in place to support the Veteran if a negative factor impacts the mentoring relationship.
- ▶ “The Probation Officers are just trying to clear cases. We feel underutilized, but the benefits far outweigh these problems.”
Quote from a mentor in the study

Veterans Affairs and Mentors

- ▶ Unlike other problem solving courts, VTC usually includes both a representative from the Veterans Administration (VA) whom is the Veterans Justice Outreach Coordinator (VJO) and a mentor program.
- ▶ The VJO is a critical part of Veterans accessing therapeutic needs.
 - ▶ Rule about being honest. An honest self reflection of what the Veteran needs can be very hard to do.
 - ▶ The Mentors see the needs and encourage Veterans to ask for those needs to be met with therapeutic treatments.
 - ▶ The VJO and Mentors help Veterans navigate the complex VA system.

Our Program

(Three Tracks: Low, Mod or High Risk/12, 18 or 24 month program)

	Pre-Acceptance	Phase One	Phase Two	Phase Three	Phase Four	Phase Five	Post Graduation
On Track	Learn about the Veteran, share with Mentors. Start the Match. Veteran is scheduling therapy or rehab	Attend Rehab, start or adjust medications	New use, Scram on	Scram off, medicines should be stabilizing	Observe for life events. Start School or Job	Observe for life events. Start School or Job	Stay connected with groups and VA Services, Stay sober
Concern	80% match or better is good.	Continued use	Attend Rehab, Police interactions, Hospitalizations	New use, Scram on	Scram off, medicines should be stabilizing	Observe for life events. Start School or Job	Withdrawal from groups
Red Flags	Diversity issues and conflicts that are too personal. Takes too long to enroll into VTC.	Continued use with Police interactions, Hospitalizations	Continued use with Police interactions, Hospitalizations	Attend Rehab,	New use, Scram on	Scram off, medicines should be stabilizing	Recidivism

High Risk Veterans

- ▶ Programs should be willing to change Mentors (Life events, safety, ethical, connection).
- ▶ Try to find any success and highlight the successes that have occurred.
- ▶ Encourage Veterans to reconnect with family or friends.
- ▶ Veterans with criminal behaviors might also have stolen valor issues. Some mentors won't work with Veterans that have this as an issue.
- ▶ Confidentiality vs Safety. PTSD is linked to an elevated risk of incarceration resulting from the use of violence and aggression (Calhoun, 2005).
- ▶ Veterans tend to be older and more educated (GI Bill) than drug court or recovery court participants.
- ▶ Courts expect regimented behavior. Military training provided Veterans with necessary discipline, character and skills to adapt to court requirements.
- ▶ Compared to general adult offenders, Veterans appear to exhibit more mental health trauma and substance abuse issues including comorbidities.
- ▶ Army Infantry, Marine Infantry, Medics/surgery teams are high risk for combat PTSD. Medical personnel potentially see traumatic events more often than Infantry Soldiers and Marines. Infantry has higher risk of Moral Injury. "I should not be killing."
- ▶ National Guard and Reserve at risk from lack of military support. Combat friends²⁰ are spread out when they are back home. No decompression time from combat to home, just an airplane ride from combat to home.

Our VTC Mentor Application process

- ▶ Two page application
- ▶ Background check. Checking for active warrants.
- ▶ Confidentiality statement.

- ▶ **Training:**
- ▶ Sign up for training at Justice for Vets, then take the classes at Psycharmor
- ▶ <https://justiceforvets.org/>
- ▶ Training is 10 short videos about 10 to 15 minutes each
- ▶ https://learn.psycharmor.org/users/sign_in

Being Veteran Trauma Informed

- ▶ **Chronic Pain**
- ▶ **Combat Post Traumatic Stress Disorder**
 - ▶ Anger as a normal trained reaction
- ▶ **Traumatic Brain Injuries**
 - ▶ Hearing Loss and Tinnitus. If it damaged their ears, it probably also damaged what's between their ears.
 - ▶ Headaches and slower executive function decision making
- ▶ **Military Sexual Trauma**
 - ▶ Breaks trust
 - ▶ Hard for Service Members to reach out for help
 - ▶ Women Veteran Services. 1-855-VA-WOMEN (1-855-829-6636)
- ▶ **Suicide**
 - ▶ 22 Veterans Suicides a day.
 - ▶ Veterans Crisis Line 1 800 273-8255 Press 1

Severe Pain in Veterans: The Effect of Age and Sex, and Comparisons With the General Population (Nahin, 2017).

- ▶ It was estimated that 65.5% of US military veterans reported pain in the previous 3 months vs. 56.4%, with 9.1% Veterans classified as having severe pain vs. 6.4%.
- ▶ Veterans aged 18 to 39 years had significantly higher prevalence rates for severe pain (7.8%) than did similar-aged nonveterans (3.2%).
- ▶ Male veterans were more likely to report severe pain than non-Veterans however, no statistically significant difference was seen between the 2 female groups.
- ▶ Severe pain reported: back pain (21.6%), jaw pain (37.5%), severe headaches or migraine (26.4%), and neck pain (27.7%).
- ▶ Veterans (43.6%) were more likely than nonveterans (31.5%) to have joint pain.
- ▶ Perspective: Prevalence of severe pain is more common in veterans than in members of the general population, particularly in veterans who served during recent conflicts. Additional assistance may be necessary to help veterans cope with their pain.



Body armor, weapon, helmet and gear is approximately 50 to 70 lbs. Photo is Afghanistan summer 2005 @ 130 degrees temperature

Combat Post Traumatic Stress Disorder

▶ Triggers

- ▶ Fireworks
- ▶ News, especially conflicts
- ▶ Startle awake, nightmares
- ▶ Police officers in tactical gear
- ▶ Cultural reminders, a VA doctor that is middle east heritage may be a trigger
- ▶ Anniversaries of Service Members KIA/WIA

▶ Treatment

- ▶ Cognitive Behavioral Therapy
- ▶ Exposure Therapy
- ▶ EMDR (Eye movement desensitization and reprocessing)
- ▶ Stellate Ganglion Block shot (SGB)
 - ▶ <https://www.rti.org/impact/stellate-ganglion-block-new-treatment-ptsd>
- ▶ MDMA (Ecstasy)
 - ▶ <https://www.webmd.com/mental-health/what-is-mdma-assisted-therapy-ptsd>



Afghanistan, Land mines marked with red rocks. 20 Million Russian land mines in the country in 2001.

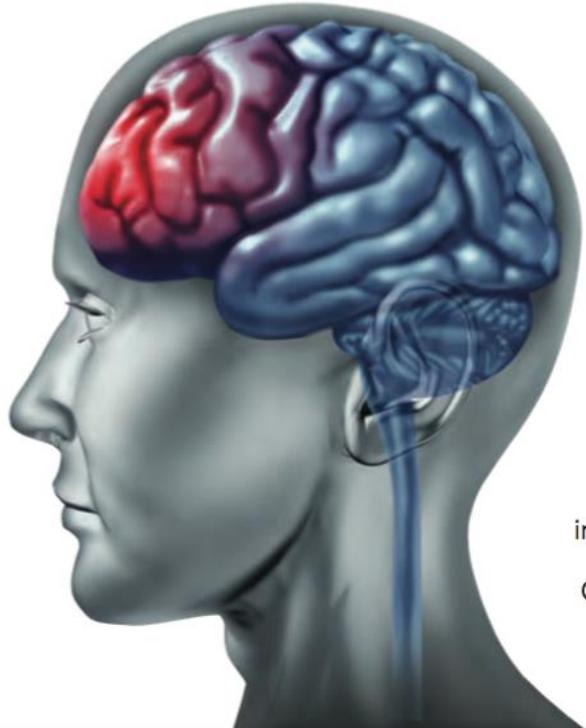
Gun charges and Domestic Violence

- ▶ The symptoms of PTSD can cause problems with trust, closeness, communication, and problem solving in a relationship.
- ▶ Anger and aggression are rewarded for military, however doesn't work well with spouse and children.
- ▶ PTSD affects families and others as well as the person who experienced trauma. Living with someone who is easily startled, has nightmares, and/or avoids social situations can take a toll on the most caring family members.
- ▶ Gun charges are common with Veterans because of their comfort with handling weapons. Gun access is also why Veteran successful suicide rates are so high.
- ▶ Mentors are encouraged to ask their Veteran if they have guns. **Also ask the Veteran if they can give their guns to a trusted friend with a gun safe while they go through life struggles for 6 months to a year.**

PTSD Centers

- ▶ **Rush, Road Home Program**
 - ▶ <https://roadhomeprogram.org/>
- ▶ **UCLA Health, Operation Mend**
 - ▶ <https://www.uclahealth.org/operationmend/>
- ▶ **Emory, MHSL**
 - ▶ https://psychiatry.emory.edu/clinical_sites/va.html
- ▶ **Massachusetts General Hospital, Home Base**
 - ▶ <https://www.massgeneral.org/psychiatry/guide-to-mental-health-resources/military>
- ▶ **Moraineview Retreat**
 - ▶ <https://www.moraineviewretreat.org/>
 - ▶ 20 Minutes outside of Bloomington
- ▶ **Reboot, Combat Recovery**
 - ▶ Spiritual Based 12 week program
 - ▶ <https://rebootrecovery.com/>
- ▶ **Women Veterans Call Center. 1-855-VA-WOMEN (1-855-829-6636)** This call center is for calls or text. It is only run by women for Women Veterans needs.

MAJOR CAUSES OF TRAUMATIC BRAIN INJURIES*



*Based on information from the National Center for Injury Prevention and Control, CDC

1%	SUICIDE
11%	ASSAULT
19%	STRUCK BY OBJECTS (INCL. SPORTS)
20%	MOTOR VEHICLE ACCIDENTS
21%	OTHER
28%	FALLS

Traumatic Brain Injuries

- ▶ Behavioral Therapy
- ▶ Surgery to reduce pressure
- ▶ Physical, Occupational and Speech therapy
- ▶ Botox Injections

SYMPTOMS OF TBI

MODERATE TO SEVERE TBI

Accounts for 10% of all cases

SYMPTOMS:

- slurred speech
- profound confusion
- seizures
- persistent headaches
- coma

MILD TBI

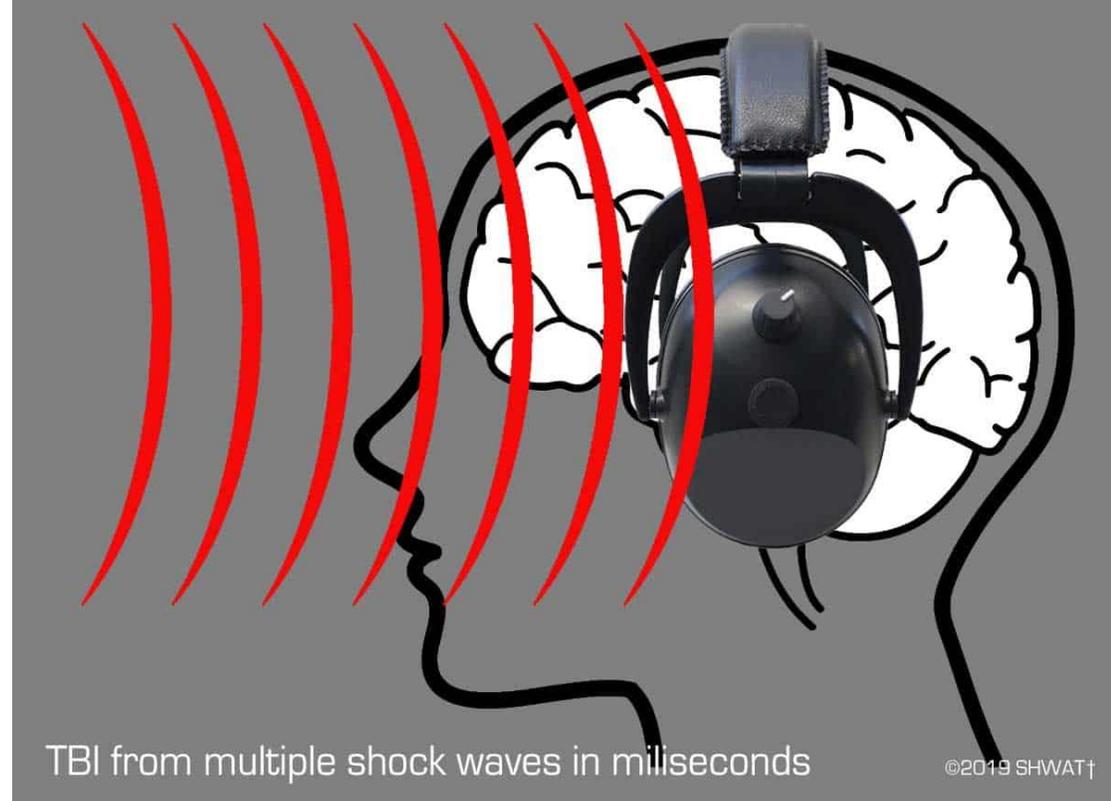
Accounts for 90% of all cases (based on WHO information)

SYMPTOMS:

- headaches
- dizziness & fatigue
- sleeping difficulties
- memory & concentration problems
- blurred vision

Veteran TBI causes

- ▶ TBI are problematic to young people's developing brain under 25 which is 70% of military.
- ▶ Most service members only think of TBI being cause by incoming explosives or being knocked out.
- ▶ TBIs can also be caused by outgoing munitions: artillery, tanks, anti-tank weapons, grenades, explosives, etc.
- ▶ The effects are multiplied in enclosed spaces: inside building, in vehicle or aircraft.
- ▶ Heavier weapons like machine guns and sniper rifles can also cause TBIs.
- ▶ Most combat arms Veterans may not even know they have mild to medium TBI injuries.



Military Sexual Trauma

- ▶ **How common is MST?**
- ▶ An estimated 1 in 4 female veterans and 1 in 100 male veterans in the VA healthcare system report experiencing MST. 40% of veterans who disclose MST to VA are men.
- ▶ MST survivors may suffer from sexual difficulties, chronic pain, weight or eating problems, or gastrointestinal problems. Additionally, they may experience difficulty with attention, concentration and memory and have trouble staying focused or frequently finding their mind wandering.
- ▶ **Substance abuse** - Drug and/or alcohol abuse up to 10 times as high for victims of sexual assault.
- ▶ Special eligibility rules apply. It is very easy to qualify for MST. Veterans may be able to receive this benefit even if you are not eligible for other VA services. There is no length of service, income, or other standard eligibility requirements. Veterans do not need to be service-connected or have been given a specific diagnosis. Incidents do not need to have been reported at the time they occurred, and Veterans do not need any documentation that the incidents occurred. MST may have happened on or off base and while a Veteran was on or off duty. The perpetrator's identity and relationship between the perpetrator and the victim are not factors in eligibility for care. There are no limits on length of treatment for MST-related conditions.

Suicidal Ideations

- ▶ Actively thinking suicide
 - ▶ Call Veterans Crisis line 1-800-273-8255 Press 1
 - ▶ Ask the Veteran where they are currently at, not their address.
 - ▶ Stay with them until professional help arrives
 - ▶ Almost always alcohol involved
 - ▶ If they are on the phone
 - ▶ Be honest with them. Let them know you are contacting help.
 - ▶ Ask them to call the Veterans Crisis Line.
 - ▶ Ask them to unlock the front door.
 - ▶ Ask them to render any weapons safe and put them away.
- ▶ Mentors need to know how to respond to suicidal active ideation or letting out previous self harm thoughts.

Military Values

- ▶ Honor
- ▶ Integrity
- ▶ Teamwork
- ▶ Selfless Service
- ▶ Diversity
- ▶ Discipline
- ▶ Bravery
- ▶ Being around other members of the military is a subtle reminder to act with a higher set of ethics. The Veteran Mentors bring these values to every conversation with their Veteran.

Teamwork is everything

- ▶ Drill Sergeants at basic training routinely give service members tasks that can only be completed as a team.
- ▶ The Drill Sergeants push teamwork above individual desires or needs.
- ▶ Veterans are trained to get through tough times with a team approach, so VTC courts should leverage that characteristic.
- ▶ Service dogs can be trained for anxiety and PTSD.
 - ▶ Turn on lights if the Veteran is having a nightmare.
 - ▶ Enter a room to make sure its safe.
 - ▶ Respond if Veteran displays signs of anxiety.
 - ▶ Take the focus off the Veteran and onto the dog.
 - ▶ Helps the Veteran reconnect with people, everyone wants to pet the dog with the signs that say do not pet.



VTC Mentor Paul and his service dog Paulie.

Chain of Command vs Chain of Trust

▶ Chain of Command

- ▶ Hierarchy everyone knows, especially strong in the military.
- ▶ Veterans have to report in to their Probation Officers, Public Defenders, VA representatives, AA Sponsors.
- ▶ Veterans can feel at the bottom of the chain.
- ▶ Guarded conversations when feeling the chain of command.
- ▶ Saying yes to the Judge:
 - ▶ because they are trained to say yes to senior officers.
 - ▶ even they don't understand what is being said.
 - ▶ don't want to be seen as being a troublemaker or difficult.
 - ▶ the anxiety or adrenaline is flowing and they immediately forget what the Judge just said.

▶ Chain of Trust

- ▶ This is established by the Veteran.
- ▶ The Veteran picks whom they trust for AA Sponsors and Mentors.
- ▶ Peer based, equals.
- ▶ Open conversations once confidentiality is established.
- ▶ Confidentiality starts with boundaries
- ▶ Mentors sitting in the back of court help by taking notes, less pressure, more comprehension and then talk to the Veterans to ensure understanding. Veterans in court tend not take notes, so the longer the discussion with the Judge, the more likely that something is missed.
- ▶ Change Mentors immediately if trust is broken for any reason.

Tipping point of support

Success

- ▶ Five to ten close support people
- ▶ Honesty Rule
- ▶ Healthy Environments
- ▶ Healthy People
- ▶ Healthy Boundaries
- ▶ Confidentiality

Relapse & Recidivism

- ▶ Isolation
- ▶ Lying
- ▶ Same environment
- ▶ Same friends and family
- ▶ Unwilling to change
- ▶ Lack of Trust

Recruiting Quality Mentors

- ▶ Mentors recruiting Mentors.
- ▶ Veterans requesting a Mentor.
- ▶ Social Media.
- ▶ Word of mouth.
- ▶ Active recruiting.
- ▶ Previous Veterans in the program
- ▶ This is Keith. Former Army, about a year and half ago, woke up one day and couldn't see. 100% Blind. ISU front row seats behind the defense.
- ▶ Next time he wants to wear a referee outfit. Keith is also part of Toast Masters public speaking.



Knowing your Mentors

- ▶ Background in Substance use, Mental health, trauma, combat, MST, TBI.
- ▶ Current issues that may make them unsuitable to be a mentor, health issues and loss of a close family member are the two most common.
- ▶ Mentor triggers. Not every mentor wants to talk every issue.
- ▶ Diversity can play a big part in Veteran-Mentor connections. Matching age, gender, race, military branch, sexual orientation can all have an impact on success.
- ▶ Have more Mentors than Veterans.

Knowing your Veterans

- ▶ Mentors focus on the thought processes of the Veteran. **#1 Lesson**
- ▶ Motivational Interviewing
 - ▶ How do you make better decisions going forward?
 - ▶ Why should you go to rehab?
 - ▶ Why should you stay sober after you graduate the program?
- ▶ Deana at food forest refuge planting white currants. Former Navy and addiction nurse.



Difference between a Mentor and a Veteran

- ▶ A razors edge.
 - ▶ Mentors find a healthy outlet.
 - ▶ Veterans turn to substances, isolation, anger, etc.
- ▶ This is Joe. He's a proud Marine. Now he works to make tiny homes for homeless Veterans in Lincoln, Illinois.
- ▶ <https://www.2x4forhope.org/>



Healthy Activities

- ▶ Healthy activities are critical to changing environments for the Veterans.
- ▶ Trauma is multisensory. Healing needs to be multisensory too. Activities like cooking, gardening, art or music are all very powerful multisensory experiences.
- ▶ Sunlight and fresh air does a lot to counter depression and negative ideas that Veterans struggle with.
- ▶ Monthly activities offers Veterans and Mentors and opportunity to connect outside the courthouse.
- ▶ Jacob with one of his three children at the food forest. He has lived experience, sobriety helped him maintain custody of his children.



Facebook Links

- ▶ 11th Judicial Circuit Veterans Treatment Court
 - ▶ https://www.facebook.com/profile.php?id=100068661228563¬if_id=1612538626637809¬if_t=feature_li_m
- ▶ Safer Foundation
 - ▶ https://www.facebook.com/saferfoundation/live_videos/

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Questions

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