EQUINE-ASSISTED THERAPY FOR VETERANS
A best practices implementation guide

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Introduction & Overview

“Veterans need and want to have a purpose and horses are a great way to have a purpose.”
- Janet Brennan, Founder & Executive Director, Shamrock Reins

Horses have long been used in a therapeutic capacity to help children and adults overcome mental and physical challenges. Horses are social animals and respond directly to human emotion by providing immediate, honest, and nonjudgmental feedback. This unique relationship between horses and humans underpins the field of Equine-Assisted Therapy.

Equine-Assisted Therapy (EAT) is wide ranging and includes a variety of disciplines. It is most commonly used to improve physical ailments and aid in the alleviation of symptoms and behaviors related to Autism, ADHD, Addiction, Trauma, and PTSD. The target population for EAT varies from young children to prisoners living in correctional facilities. An area of growing popularity is EAT for veterans. Veterans’ programs typically include:

- Equine-Facilitated Psychotherapy (EFP)
- Equine-Assisted Learning (EAL)
- Therapeutic Horsemanship or Therapeutic Riding (TH/TR)

According to the Professional Association of Therapeutic Horsemanship International (PATH Intl), EFP is defined as “an interactive process in which a licensed mental health professional working with or as an appropriately credentialed equine professional, partners with suitable equine(s) to address psychotherapy goals set forth by the mental health professional and the client.” EAL is “an experiential learning approach that promotes the development of life skills for educational, professional and personal goals through equine-assisted activities.” And, lastly TH/TR is “an equine-assisted activity for the purpose of contributing positively to the cognitive, physical, emotional, and social well-being of an individual.”

While EAT is primarily viewed as a non-traditional, experimental treatment method for PTSD, it is also used to improve other aspects of veterans’ lives and to enable the transition from service to civilian life. A study conducted at the Ride on Center for Kids in Georgetown, TX revealed that participating veterans in a Therapeutic Riding program reported increased sociability, a reduction in isolation, and an increase in trust of others.

Increased incidence of PTSD among veterans returning home from combat, availability of funding by the VA and other sources, and positive reported outcomes observed in veterans participating in EAT programs have led to a surge in the number of programs offered. A 2019 study noted that between 2009 and 2016, the number of equine centers accredited by PATH Intl

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providing services to veterans increased from 89 to 335 centers.\(^3\) While organizations such as PATH Intl and Eagala offer certifications, standards, and guidance to instructors providing EAT to veterans, little research exists on best practices for program implementation. This project aims to provide a framework for programmatic implementation and improvement based on conversations with existing EAT programs for veterans. Additionally, a review of the certifications necessary to run an EAT program along with a sample program design are included.

### Purpose

The veteran population is unique and successful EAT programs for veterans cater to their specific needs. This report is intended to provide equine facilities looking to build out a program for veterans with a framework to guide the program’s implementation. The goal of this research is to enable new programs to understand the best practices shared among existing programs, certifications necessary to start a program, and a sample program design which incorporates the best practices learned along with the feedback and preferences of veterans surveyed in the Philadelphia area.

This report sets out to answer the following questions:

- **What are the commonly used best practices among successful Equine-Assisted Therapy programs for veterans?**
  - In this section, the best practices shared among six successful EAT programs for veterans are organized into four categories: 1) Structure, 2) Curriculum, 3) Outcomes, and 4) Resources. The best practices are key themes observed across interviews with Program Directors, Executive Directors, and Instructors.

- **Which certifications are necessary to run an Equine-Assisted Therapy Program for veterans?**
  - This section lays out the certifications necessary to run a credible EAT program. The requirements for each certification, either through PATH Intl or Eagala, are provided. The steps to become a PATH Intl or Eagala accredited facility are included as well.

- **Applying the best practices gathered, what should a sample program design entail? Case Study: Thorncroft Equestrian Center’s Intro to Horsemanship Program**
  - A sample program design is included in this section to demonstrate how the best practices in section one can be applied to a new program. The program design is specific to Thorncroft Equestrian Center in Malvern, PA. Results from a survey of veterans in the Philadelphia area helped to inform the program’s development.

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Methodology

To evaluate the best practices and implementation of EAT programs for veterans, this study used a combination of interviews with existing program directors and a survey of veterans in the Philadelphia-area. The mixture of quantitative and qualitative data helped to provide a comprehensive review of how existing programs operate and the interest-level and expectations of veterans to provide a best practice guide and inform the development of a new program.

⇒ The commonly used best practices of successful EAT programs for veterans are based on key themes observed across interviews with the following programs and individuals who currently offer EAT programs to veterans:
  o Chelsea Bourn, Program Director, *High Hopes Therapeutic Riding, Inc.*
  o Janet Brennan, Founder & Executive Director, *Shamrock Reins*
  o Laura Corsun, Founder & Executive Director, *High & Mighty Therapeutic Riding & Driving Center*
  o Heidi Deming, Program Director, *ROCK (Ride on Center for Kids)*
  o Carolyn Dunkel, Therapeutic Riding Instructor, *Thorncroft Equestrian Center*
  o Lisa Hirsch, Therapeutic Riding Instructor & Office Manager, *Thorncroft Equestrian Center*
  o Ann Marie Shaw, Executive Director of Development, *Building Bridges Foundation*

⇒ The general information about instructor certifications and equine center designations commonly used for EAT programs for veterans was gathered through conversations with staff members at PATH Intl and EAGALA.
  o PATH Intl:
    ▪ Danielle Crooks, Programs Representative
    ▪ Brittnay Holdman, Credentialing Support Specialist
    ▪ Karen Province, Center Memberships
  o EAGALA:
    ▪ Janet Crandall, Chief Financial Officer
    ▪ Marilee Laney, Member and Program Support

⇒ To inform the development of an Intro to Horsemanship program at Thorncroft Equestrian Center, the interest-level and expectations of veterans were gathered through a 15-question survey distributed to several veterans’ networks in the Philadelphia area. 48 individuals completed the survey. The number of recipients is unknown as the survey link was distributed to several networks. The sample population was a convenience sample.
  o The survey aimed to capture veterans’ level of interest in learning about horses and how to ride, their likelihood to participate in a horsemanship program, their areas of interest, and the desired program participants.
  o The survey gathered demographic information on age, gender, and whether or not the person completed the survey was a veteran or civilian.
  o The survey was distributed to the Philadelphia Veterans Network; University of Pennsylvania Veterans Network; Villanova University Veterans Network; Cabrini College Veterans Network; Eastern University Veterans Network.
Limitations

⇒ The reliability and validity of the interview protocol is a key limitation. The interview protocol evolved over time as information was gathered. The best practices of existing programs interviewed first became a framework for the questions asked later. The sample size was small as only five programs were interviewed. The best practices may not be valid from a participant perspective as Executive Directors and Program Directors are compelled to share that their programs are well-designed and well-managed.

⇒ The reliability and validity of the survey measure is an additional limitation. The survey results are impacted by framing as only those interested in learning about horses and how to ride likely clicked the survey link. Additionally, perception and social desirability bias may have held back participation in the survey. While the program advertised in the survey was stated to be a camaraderie-based learning activity, some veterans may perceive that working with horses is exclusively a therapeutic exercise to overcome PTSD. Veterans may be concerned that they could be perceived to be someone with PTSD if they complete the survey and indicate that they are interested in participating in the program.

⇒ This research does not include qualitative feedback from veterans who have participated or currently participate in EAT programs. Due to time constraints and the inability to gather in small groups as a result of Covid-19, this research does not include qualitative feedback from veterans who have participated or currently participate in existing programs. Such feedback could improve the validity of the best practices noted by program staff.

⇒ This research does not include direct feedback from funders. Due to time constraints, this research does not include direct feedback from funders. Feedback from funders about the criteria used to evaluate existing programs for funding could improve the validity of the best practices noted by program staff.
Key Findings

What are the commonly used best practices among successful Equine-Assisted Therapy Programs for veterans?

All of the information included in this section was gathered through interviews with Executive Directors, Program Directors, and Therapeutic Riding Instructors at the following centers, all of which offer EAT programs for veterans: Building Bridges Foundation, High & Mighty Therapeutic Riding & Driving Center, High Hopes Therapeutic Riding, Inc., ROCK (Ride on Center for Kids), Shamrock Reins, and Thorncroft Equestrian Center. The best practices noted are derived from key themes observed across the interviews. The quotes are direct comments from the individuals interviewed.

Best practices observed across interviews with successful EAT programs for veterans were organized into the following four categories:

⇒ Structure
⇒ Curriculum
⇒ Outcomes
⇒ Resources

All Equine-Assisted Therapy Programs for veterans should have a clear Structure, a defined Curriculum, known intended Outcomes, and an understanding of the Resources required for implementation. The segment of the veteran population the center would like to serve should be known prior to program development. Will the center serve veterans with severe PTSD and other mental health challenges? Will the program enlist the help of a mental health professional or will it be a camaraderie-building exercise? Once the target population is determined, the goals and intended outcomes of the program or programs should be clearly defined. The structure of the program and the curriculum developed should align with the intended outcomes. Lastly, the resources required to administer the programs offered should enable programmatic success.

Before getting into best practices, it is important to briefly revisit the types of EAT programs offered to veterans.

**Equine-Facilitated Psychotherapy (EFP)**

⇒ EFP programs target veterans who face mental health challenges, including PTSD, anxiety, depression, trauma, among others.
⇒ EFP programs require a treatment team which includes an equine specialist, a mental health professional, and a horse.
⇒ For EFP programs, the intended outcomes are specific to the veteran’s treatment plan.

**Equine-Assisted Learning (EAL)**

⇒ EAL programs can be offered alongside EFP programs. Many centers that work with veterans with severe PTSD require participants to complete a series of EFP sessions prior to moving on to EAL or TH/TR.
⇒ EAL programs can be individual or group-based and require the assistance of volunteers to ensure safe interaction between the veterans and the horses.
⇒ For EAL programs, the intended outcomes may be as follows: learn horsemanship skills, improve coping skills, improve communication, etc.

**Therapeutic Horsemanship or Therapeutic Riding (TH/TR)**
⇒ TH/TR programs can be individual or group-based camaraderie-building activities.
⇒ For TH/TR programs, the intended outcomes may focus on building trust or improving relationships through the bond created between the veteran and their horse.

**Structure**
Program structure should be established prior to implementation. Centers should think through the segment of the veteran population they would like to serve, how they plan to effectively work with that population, and how to continue to attract and retain participants. Veterans like to work with other veterans in a peer-to-peer capacity for networking and socialization. An environment that caters to veterans can improve engagement and retention. Clear policies and procedures for participants help to prevent confusion and frustration. And lastly, consistency in the scheduling of sessions, periodic check-ins and transportation establish a sense of accountability and encourage ongoing participation.

The following are best practices related to Structure observed across successful programs:

◊ **Offer programs that align with the segment of the veteran population the center would like to attract.**

◊ **Maintain a consistent session schedule with check-ins, provide transportation, and enlist the help of other veterans to encourage ongoing program attendance and retention.**

◊ **Create a veteran-focused environment with clear policies and procedures and a shared space for networking and camaraderie-building.**

**Offer programs that align with the segment of the veteran population the center would like to attract.**
EAT for veterans is a wide-ranging field and, as a result, the programs offered vary by center. Many centers welcome all veterans and do not require that participants be diagnosed with PTSD. Such programs are typically offered as group-based TH/TR. However, for centers looking to offer programs to specific segments of the veteran population, differentiation is important. For example, centers that choose to work with veterans with severe PTSD may offer EFP programs that incorporate the oversight of a mental health professional. Centers looking to work with women who experienced sexual trauma may offer group-based women only TH/TR programs. Understanding the target population and their needs from a mental health, recreational, or learning perspective will inform the types of programs a center should offer.
“I don't have a criteria that you have to have PTSD or you have to have been deployed or you have to have some challenge related to your service to come to us. They don't have to do that if they want to enroll in TH/TR. I'm happy to help them because they're a veteran. It's our chance to give back. And no matter what anybody says, something affected them about their service, even if it's just reintegrating back into civilian life.” – Executive Director

Recommendations…

⇒ For centers looking to work with veterans suffering from PTSD and other mental health challenges, EFP should be offered. EFP sessions are facilitated by an equine-specialist and a mental health professional. The sessions are specific to the needs of the veteran.

⇒ For centers looking to work with veterans from a therapeutic perspective but not necessarily for the treatment of PTSD, EAL or TH/TR should be offered. The sessions should be group-based to enable veterans to socialize and build camaraderie with one another.

⇒ The programs a center offers are not mutually exclusive. A facility could offer both EFP and EAL/TH/TR. Some veterans may advance from EFP to EAL/TH/TR if they achieve the desired outcomes during the EFP sessions.

⇒ Many centers offer women-only horsemanship programs. The program may be for women who suffered sexual trauma during their military service or just for women veterans only.

Maintain a consistent session schedule with check-ins, provide transportation, and enlist the help of other veterans to encourage ongoing program attendance and retention.

Ongoing attendance can be a challenge for veterans, especially those who suffer from PTSD as it may hold back participation. Consistent session schedules week after week along with check-ins to hold veterans accountable are helpful. Additionally, if transportation is an issue, enlist the help of volunteers, particularly other veterans, to pick-up and drop-off participants before and after sessions.

“We check in with them before their session, even though they're coming the same day, same time every week. We still confirm their sessions the night before. We have to keep in mind that with their PTSD and traumatic brain injury, sometimes they get the days confused and other things can be going on. We tell them, we will confirm your session the day before. We must hear from you by 3p.m. the day before. If we don't and we've tried multiple ways to get you, we are calling your emergency contact. And if we can't get your emergency contact or they haven't been able to reach you, then we are sending the police to your house for a wellness check or we’re coming.” – Executive Director

Recommendations…

⇒ Sessions or programs should be scheduled at the same time, on the same day, each week to maintain structure. Cancellations by the facility should be avoided.

⇒ For facilities serving veterans with PTSD, call the night before each session and maintain an emergency contact for each participant.

⇒ Transportation to and from sessions or programs should be provided for those in need. The VA typically provides a shuttle for participants who live at a VA facility. Program volunteers are another resource to provide transportation.
Create a veteran-focused environment with clear policies and procedures and a shared space for networking and camaraderie-building.
A veteran-focused environment is critical to programmatic success. Some centers choose to work exclusively with veterans while others stop all other programming while veterans are at their facility. Clear policies and procedures create structure around programmatic expectations of participants and help to avoid confusion and frustration. Successful programs build-in networking time to encourage camaraderie among participants.

“They are required to sign our participation policy. We have a very set policy. They receive a book to that effect with everything in it. It tells them what to wear. We talk about our communication. We talk about our mandatory forms. And our communication is such that we tell them once you join, once you enroll at our center, then you are one of us. And we always make sure that you are okay. So, we are going to stay in touch with you. You must reply to us. So, they know what our commitment is to them. There is never a cost to them and there is no limit to their participation. But they need to be responsible and their commitment is that they are going to work at this. And they're going to abide by our rules.” – Executive Director

Recommendations…
⇒ Work exclusively with veterans or stop all other programming when veterans are at the center to create a veteran-focused environment.
⇒ Provide food and host “fellowship” either before, after, or during sessions to allow veterans to socialize with one another and build camaraderie.
⇒ Require that all participants sign a participation policy essentially opting into the rules and procedures of the program and to be contacted by program staff to confirm attendance at upcoming sessions.
⇒ Post barn rules throughout the facility to ensure that all participants, staff, and volunteers are aware that firearms, tobacco, and alcohol are prohibited. Include safety guidelines such as boots and helmets are required at all times.
⇒ Review equine terminology and procedures such as tacking and grooming techniques with all staff and volunteers to ensure that participants receive consistent instructions to avoid frustration and anxiety.
⇒ Create a safe and quiet space for veterans to retreat to should they need to step away from the program due to flashbacks, anxiety, or other reasons.
⇒ Cease all barn work during programming. Background noise is distracting, and the dust kicked up by tractors and other machinery could have an adverse effect on veterans with respiratory issues borne out of exposures during combat.
Curriculum
Successful curriculum development considers the goals of the participants and enables the achievement of such goals over time. EFP program curriculums differ from EAL and TH/TR programs. Most EFP curriculums are structured by the mental health professional and align with the veteran’s treatment plan. As a result, the curriculums vary by veteran and are ground-based only. EAL and TH/TR programs may incorporate riding and tend to have set curriculums that are repeatable for future programming. Curriculums are proprietary and are not openly shared. Many centers develop their own while others rely on research-based curriculums created by third-party vendors. Each center should offer a curriculum that works for their instructors and participants.

The following are best practices related to Curriculums observed across successful programs:

- For EAL or TH/TR programs, utilize a unit or module-based curriculum to allow participants to progressively advance and grow with the program.
- Dedicate one to two sessions at the outset of the EAL or TH/TR curriculum to match participants and horses and observe horse behavior.
- For EFP programs, ensure that the curriculum is customized to the veteran based on their treatment plan.
- Third-party curriculums, if used, should be evidence-based and designed for veterans.

For EAL or TH/TR programs, utilize a unit or module-based curriculum to allow participants to progressively advance and grow with the program.
Once a veteran develops a bond with their horse and feels comfortable at a center, it is important to maintain that sense of community and allow them to continue to return to the center to work with their horse. Unit or module-based curriculums allow a veteran to continue to develop their horsemanship skills even upon completion of a traditional weekly program. Some centers offer only module-based programs while others offer structured weekly programs with the option to continue beyond the weekly program through additional units or modules.

“Instead of having an eight-week intro, then an eight-week beginner, then an eight-week intermediate, and then an eight-week something else and something else as you keep progressing. We instead developed our TH/TR to be module and unit based. So, it's a series of units. Each unit has goals and objectives and associated horse activities.” – Executive Director

“They complete it at their own pace, so they don't feel the pressure of needing to get everything or partially learn things in eight weeks. And so, under the circumstances of everything that they go through, this is not supposed to be an additional pressure-filled scenario for them. And with the fact that it's a series of units, we have the ability to keep adding to the units.” – Executive Director
Recommendations…

⇒ Many centers create unit or module-based curriculums to enable veterans to continue advancing their horsemanship skills. Once a veteran has completed a unit or module, they are able to proceed through to the next one and so forth. Curriculums with a finite end point – eight sessions, for example – inadvertently terminate the veteran’s bond with their horse and the therapeutic benefits of that relationship.

⇒ Module-based or unit-based curriculums are used for EAL or TH/TR. Veterans participating in EFP sessions should reach the outcomes laid out in their treatment plan prior to advancing to EAL or TH/TR.

⇒ The Eagala model’s focus is on EFP. Therefore, a center that follows the Eagala model will offer a curriculum aligned with the veteran’s treatment plan.

Dedicate one to two sessions at the outset of the EAL or TH/TR curriculum to match participants and horses and observe horse behavior.

The bond forged between the veteran and their horse underpins the efficacy of equine-therapy. Veterans should be carefully matched with horses at the outset of the program and the relationship should be maintained throughout. An understanding of horse behavior and herd dynamics is important to review early in the curriculum as well.

“Therapeutic Horsemanship is all about the horse and the connection with the horse. Veterans have difficulty with trust, and they learn to build trust through being around the same horse.” – Program Director

“We train [the horses] to have good ground manners. And if they're able to be ridden, we train them to be ridden. But the purpose of this is to give [the veteran] every bit of a mission and a purpose. And learning how to handle a thousand-pound animal does that for them. If the horses just knew exactly what to do and then did it, it defeats the purpose because that's the formation of trust and a bond.” – Executive Director

Recommendations…

⇒ Whether the veteran suffers from severe PTSD and communicates their feelings through the horse or is participating in a program to build a new skill, the bond they form with the horse is a lasting relationship. Ensure that each veteran is matched with a horse that they are able to trust and work comfortably over time.

⇒ The curriculum for individual and group-based programs should include part of a session to observe the horses in the paddock and discuss their behavior. Their herd mentality is similar to the camaraderie and social dynamics veterans are accustomed to in the military. Observation of horse behavior may help draw parallels to veterans’ experiences.
For EFP programs, ensure that the curriculum is customized to the veteran based on their treatment plan. EFP curriculums should focus on enabling a veteran to meet their therapeutic goals through their interactions with the horse. All EFP curriculums are ground-based and do not incorporate riding. The mental health professional typically manages the session with the veteran while the equine specialist ensures the safety of both the horse and the veteran during the session.

“We only teach them general safety principles around the horse in EFP and that's it. We don't teach them how they think, how they see, how they hear, how to do things appropriately with them because we want the horse to teach them.” – Executive Director

“This is really where a lot of the AHA moments come in, because now the horse is looking relaxed. Its head might be down, it might actually be nuzzling them. And then the awareness begins. ‘Okay, now I understand why certain people react to me the way they do’ or, ‘now I understand what I need to do to sort of help control myself’, that type of scenario.” – Executive Director

**Recommendations…**

- Mindfulness exercises should be incorporated at the outset of each session and may include:
  - Put your hands on the horse
  - Put your head down and try to synchronize your breathing with the horse’s breathing.
  - Walk around the arena and every left foot, stop and take a breath.
  - “This is really where a lot of the ‘aha’ moments come in, because now the horse is relaxed, it might actually be nuzzling them. And then the awareness begins. ‘Ok, now I understand why certain people react to me the way they do’ or ‘now I understand what I need to do to help control myself’.”

- The therapist or mental health professional should create obstacles in the ring as a metaphor for the obstacles the veteran must overcome in their life.
  - The therapist should guide the veteran through an exercise to build an obstacle. The obstacle could be as simple as getting the horse to stand in a box on the ground.
  - Getting the horse to overcome the obstacle and stand in the box is analogous to overcoming the obstacle the veteran faces in their day to day life.

- The therapist should allow the veteran to engage in the activity with the horse a number of times and then ask processing questions related to the activity, such as:
  - What was your horse doing?
  - Why wasn’t your horse walking over there or why did your horse turn its head and walk away?
  - What do you think your horse is feeling?
Third-party curriculums, if used, should be evidence-based and designed for veterans.
One center noted that they use Equus Effect, a third-party curriculum designed specifically for veterans. The Equus Effect is an evidence-based third-party curriculum that can be purchased and utilized by any center. PATH Intl is also in the process of developing a curriculum based on a research project called “Man O’ War” conducted by Columbia University to evaluate the clinical effectiveness of equine therapy for veterans. Curriculums like Equus Effect and the anticipated curriculum through PATH Intl provide standard practices and guidelines for centers to follow which ensure more structure than proprietary curriculums.

Recommendations…
⇒ The Equus Effect is an evidence-based curriculum and was created for military service members. The mission is “to provide veterans with the tools they need to build healthy relationships.” The curriculum spans 5 weekly, 3-hour sessions and is ground-based. The curriculum focuses on the equine specialist as a facilitator or coach rather than a teacher to the veteran. Throughout the curriculum, the veteran learns natural horsemanship skills. The equine specialist must undergo a facilitation learning session, which costs $4000. The equine specialist must also attend two weekend sessions, which cost $795 each and are based in Connecticut.

⇒ PATH Intl is in the process of developing a curriculum in collaboration with the Man O’ War Project. The curriculum will focus on service members who suffer from PTSD. The intended outcome is to improve PTSD symptoms. The curriculum is evidence-based, and the outcomes are measurable. The hope is that insurance companies will fund participants given that the outcomes are proven from a clinical perspective. The curriculum should be available after December 2020. The program is intended to entail 8 weekly sessions. PATH certified instructors can take a course on the curriculum once it is rolled out in December and will be able to watch sessions on-demand to then replicate during their programming.
Outcomes
Outcome measurement is an important aspect of all equine therapy programs. Programs are only effective if their intended outcomes are achieved. Centers have different approaches to outcome measurement and the methods used are closely related to the types of programs offered. EFP programs tend to focus on the improvement or alleviation of PTSD symptoms. EAL and TH/TR programs, on the other hand, focus on the achievement of individualized goals and objectives. Each program must utilize the outcome measurement method that aligns with their curriculum. Curriculum design should be revisited if the intended outcomes are not achieved or the outcomes should be reviewed to ensure they are attainable based on the program’s structure.

The following are best practices related to Outcomes observed across successful veterans’ programs:

◊ **EFP programs should utilize research-based scales to measure outcomes and track each veteran’s progress through their treatment plan to ensure sessions are effective.**

◊ **EAL and TH/TR programs should utilize an individualized, goals-based approach to measure outcomes.**

**EFP programs should utilize research-based scales to measure outcomes and track each veteran’s progress through their treatment plan to ensure sessions are effective.**

The intended outcomes of EFP programs are specific to the treatment plan created for each veteran by a mental health professional. Outcomes may include the alleviation of symptoms related to PTSD, depression, or anxiety, among others. Unlike EAL and TH/TR, EFP sessions enlist the help of a mental health professional who may bill the session through the veteran’s insurance provider as psychotherapy. In order to do so, a few centers noted that the mental health professionals use research-based scales, such as the PCL-5 available through the VA, to track the progress of each veteran through their treatment plan. Written or verbal self-assessments that reinforce learned behaviors from prior sessions are also effective at ensuring the sessions are yielding their intended results.

“After they give us that initial information on the assessment form, we ask them about their insomnia, their nightmares and flashbacks. They rate those and then they rate on a scale of zero to 10, their anxiety, their trust, their social detachment, their vigilance, their sadness, their fatigue and their pain. All of those things are key points with suicide. And so, we definitely have more than this, but we have at least 20 documented suicide saves. And what I mean by that is at their enrollment visit, they openly admitted that they wanted to commit suicide. They openly admit that they have a plan and that they struggle every day to not do it. And then they tell us they don't even think about it anymore.” – Executive Director

“The first thing that we ask them on the self-assessment form is how did you use a coping skill that you learned in your previous sessions or that you learned last week? How did you use that this week? Because the whole purpose of this is to develop those healthy coping skills. And we want to reinforce that the way to reinforce it is to get them to think about how they do it.” – Executive Director
Recommendations…

⇒ The VA is a good resource for PTSD scales that can be used for EFP programs. A commonly used scale by Eagala is the PCL5. A copy is included in the Appendix.
⇒ PTSD scales can be used after each session but may be a bit overwhelming if used at that frequency. For reference, Wounded Warrior Project surveys veterans who access their benefits every 30 days, not weekly.
⇒ Self-assessments that ask about the reinforcement of skills learned can be used weekly, after each session, to ensure that the sessions are effective.
⇒ Data collected from self-assessments and scales should be recorded to ensure that progress is made throughout the program. Data can also be used to make programmatic and curricular changes if goals and objectives are not met.

EAL and TH/TR programs should utilize an individualized, goals-based approach to measure outcomes.

For EAL and TH/TR programs, an individualized, goals-based approach to outcome measurement allows program participants to take ownership of their experience. By setting personal goals, veterans are more likely to remain engaged and committed to the program.

“Research shows that when someone is involved in creating their own goals, then they're more likely to attain those goals. So, if you start off and they say, I don't want to work on my communication, I don't want to work on my coping skills. I want to learn about horsemanship. Okay, we need to respect that. The program is supposed to be therapeutic. That's what we're supposed to be. That's what we say we're doing. And so, they say they want to learn about horses. Do you want to learn about grooming? Do you want to learn about tacking? Do you want to learn about medication? Do you want to learn about first aid? And then, you structure your curriculum to meet those goals and objectives.” – Program Director

Recommendations…

⇒ Program enrollment forms should be given to all veterans at the outset of an EAL or TH/TR program. The program enrollment form should ask veterans what they would like to achieve during the program or what they would like to get out of the program. The questions could be as simple as “what would you like to learn?” and could list a series of possibilities along with “other” to allow the veteran to write in their own response.
⇒ A post-program form should be given to all who complete the program. The form should ask a series of questions about the program itself – curriculum, time of day, length, format (ground or riding), etc. The form should also ask if the veteran achieved the goal or objective they set out to achieve at the program’s outset and, if not, how the program could be changed to enable the achievement of the stated goal.
⇒ Personal goal-setting allows participants to take ownership of their goals and engage in activities during the program that help achieve those goals. It also allows participants to focus on what they would like to focus on, within reason.
⇒ While the goals of each veteran may vary, volunteers and staff should use the goal-setting exercise as a way to cater the curriculum to the interests of the participants.
Resources
Centers must carefully consider how their staff, volunteers, horses, community partnerships, and funding sources align with the programs they plan to offer. For example, Wounded Warrior Project offers funding to participants in EAT programs, however, funding is only available to post-9/11 veterans. Centers should consider if they intend to enlist the help of veterans as volunteers or if they will require staff and volunteers to undergo military culture training. Such training is commonly used to ensure staff and volunteers have an understanding of the nuances of working with veterans. Additionally, community partnerships can be a key driver of participation and retention by serving as a marketing outlet and source for veterans as advocates and volunteers.

The following are best practices related to Resources observed across successful veterans’ programs:

◊ Carefully select staff and volunteers with an understanding of military culture either through experience or through the completion of military culture training.

◊ Partner with other veteran-focused organizations in the local community, attend outreach events, and establish a relationship with the local Veterans Association to attract participants.

◊ Align funding sources with the programs offered and the target segment of the veteran population.

Carefully select staff and volunteers with an understanding of military culture either through experience or the completion of military culture training.
Many veterans who participate in EAT programs suffer from severe PTSD and other service-related traumas. The staff and volunteers who assist with the administration and facilitation of the programs offered must be trained to work with the segment of the veteran population served. Additionally, the horses used, especially for EFP sessions must be carefully selected for their ability to interact safely and effectively with program participants.

“All of our staff go through training background checks. They all take military culture training. We do the same for our volunteers. We have three types of volunteers. They go through the appropriate level of training. It includes a classroom and hands on training.” – Executive Director

“There is very specialized training in learning how to deal with this population. You can’t ask them questions, you can’t come up behind them, and you can’t touch them. They may be good today and come in and come over to you and give you a hug. And then the next time you see them, they are so distant and having a difficult time. We train everyone on how to handle flashbacks. We can tell you there are numerous things that have happened that if you didn't understand the population, you would not be able to deal with it. Let's say it takes a certain degree of maturity. So, we don't we don't have a ton of volunteers. They often can't stay too long when they do, and we need consistency.” – Executive Director
Recommendations…

- Trust is a key component of successful EAT programs. Veterans build trust through consistency. Consistent staff, volunteers, and horses are necessary for all EAT programs to work. When selecting staff and volunteers, ensure that they are dedicated to working with veterans and are willing to make the commitment to be at every scheduled session.

- While certifications are not a requirement, staff should be certified either through PATH Intl or Eagala to improve the integrity and credibility of the program. Both PATH Intl and Eagala offer military services designations to certified instructors.

- All volunteers and staff should go through military culture training. The VA offers some trainings. Another popular source is PsychArmor. PATH Intl also offers a training called Equine Services 4 Heroes. The training is 3 weeks online and costs $199. It reviews military culture as well as methods for centers to adapt their programs to the needs of the veteran population.

- Veterans are a unique population and those who suffer from PTSD can be challenging to work with due to their symptoms. Family members of veterans, first responders, and health care workers tend to make the best volunteers.

- The horses utilized in an EAT program, especially an EFP program, should not be lesson horses. Lesson horses are trained to follow a specific lesson plan and while that is helpful in certain scenarios, they may lack the sensitivity to human emotion that is required for an effective EFP program.

Partner with other veteran-focused organizations in the local community, attend outreach events, and establish a relationship with the local Veterans Association to attract participants. Attracting veterans to EAT programs is a challenge for most centers. Many veterans do not see the value in working with horses and others do not like the stigma that surrounds mental health and therapy. Working with community organizations and the VA and attending outreach events can help to attract participants.

“Finding veterans to enroll in the program is not an easy thing even though we have a lot in this area and most organizations struggle with that. We've been very fortunate because of the networking that we've done. We collaborate very strongly with the veteran’s treatment courts. I reach out all over and then it starts to become word of mouth. You have to go to a ton of outreach events. You have to go to the same events all the time, even when they don't yield anything.” – Executive Director

“Getting groups of veterans together, which is I think what we really need in order for these sorts of programs to work, can be really difficult. And that's why we've had the most success partnering with another organization that already has the captive audience of veterans. So, say they normally would have their group therapy on Monday at 11 o’clock in the morning. They just come to us for that session.” – Program Director
Recommendations…

⇒ Most centers have a relationship with their local VA. Establishing the relationship may require several meetings but once it is formed, the VA will typically refer veterans to the center for their services.

⇒ If a center has a relationship with the VA and the veterans participating through the VA are PTSD sufferers, the VA will often send their own therapists to the sessions to serve as the mental health professional.

⇒ The VFW is a good community organization to partner with, especially for older veterans. One center connected with their local VFW and hosts a weekly coffee hour for veterans at the barn.

⇒ Wounded Warrior is a larger national organization that refers veterans to EAT programs. Wounded Warrior works with post-9/11 veterans only and has strict assessment requirements for veteran participants.

⇒ The Joseph Dwyer Peer-to-Peer Network is a national organization with a presence in most states. The network is a source for participants and volunteers.

Align funding sources with the programs offered and the target segment of the veteran population.

EAT programs are typically offered to veterans free of charge. Most programs cost anywhere between $140 and $175 per hour per veteran. Centers have to consider their typical overhead along with the additional staffing, administration, and credentials required to work with the veteran population. While some EFP programs are eligible for medical insurance reimbursement, most veteran programs are funded through the VA, grants, the Wounded Warrior Project, and private donations. Funding sources must align with the programs offered. Grants through the VA and Wounded Warrior Project require that centers be accredited, and instructors be certified through Eagala or PATH Intl. Private funding may be a bit more flexible depending on the types of donations received.

“There are no criteria that a veteran has to have PTSD other than if that is a funding requirement. If they are a veteran, they fall under the parameters of the V.A. grant for all veterans, no matter what. I always request their DD214.” – Executive Director

“One of the things that we have found is that a certain subset of veterans are actually not willing to receive services through federal funds, through the V.A. or Wounded Warriors, because there is some notification system that can somehow tie to whatever benefits they receive. And if they're completing these sorts of therapeutic programs, it can negatively affect the benefits that they receive. So, we have found that they're more willing to participate in programs when it's not tied to the VA hospital or Wounded Warrior or some federal organization like that.” – Program Director
Recommendations…

⇒ Most veterans have their health insurance through the VA and the VA does not reimburse for equine therapy. However, the VA includes equine therapy in the Veterans Wellness Act as part of the Suicide Act and appropriates funds to it. The funds are accessible through VA grants.

⇒ Many centers ask veterans for DD214s to ensure they served or are actively serving and that they were honorably discharged from their service. Funding for veterans must only be used for veterans and DD214s provide proof of military service.

⇒ The VA Adaptive Sports Grant is available to Eagala centers that are military services designated. Eagala receives the grant funding from the VA and distributes it to eligible centers. The grant funds 8 weekly sessions per veteran. The funds cover the session for the veteran – $175 typically split 60/40 between the mental health professional and the equine specialist – along with compensation for the center in the form of a $50 facility fee.

⇒ The VA Adaptive Sports Grant is also available to PATH Intl accredited centers. PATH Intl receives the funding and distributes it to centers based on their operating budget.

⇒ PATH Intl accredited centers are also eligible for funding through the Wounded Warrior Project. Wounded Warrior Project works with post-9/11 veterans and reimburses $75 per session for up to 10 sessions and veterans are able to request an additional 10 sessions. Wounded Warrior Project requires a lot of paperwork for eligibility and stays in close contact with the veterans who utilize the benefit. Veterans are typically surveyed about the program and if it has helped them in various aspects of their life. Surveys are distributed at 30, 60, 90, and 120-day intervals.

⇒ Centers are eligible to apply for VA grants directly in addition to receiving funding through PATH Intl and Eagala. Larger centers tend to be the only facilities that write their own grants given that it is a resource intensive process.

⇒ Funding through private donors and other foundation grants outside of the VA is common. Many veterans do not want to share their participation in EAT programs with the VA because they worry that their VA benefits will be reduced as a result. Private donations and foundation funding allow for more flexibility from an oversight perspective, but fundraising does require a significant amount of resources to be successful.
Which certifications are necessary to run an Equine-Assisted Therapy Program for veterans?

All of the information in this section was gathered through conversations with several staff members at PATH Intl and Eagala.

While certifications are not required to run EAT programs for veterans, they do enhance the credibility of a program. PATH Intl and Eagala are two organizations that offer certifications to instructors. PATH Intl is the most commonly used as the certifications allow for an instructor to engage in a range of therapy programs from EFP to EAL and TH/TR. Eagala’s focus is on mental health and the designation is used for EFP only.

PATH International Certifications and Accreditation
PATH Intl’s mission is “ensuring excellence and changing lives through equine-assisted activities and therapies.” PATH Intl offers several certifications for equine therapy instructors. PATH Intl Certifications are a bit more flexible than Eagala in that instructors can run EFP, EAL, or TH/TR programs. The curriculums can be ground-based only or incorporate riding, depending on the certification. The two that are most commonly used are the Certified TH/TR Instructor and the Equine Specialist in Mental Health and Learning. Additionally, centers that partner with PATH Intl can apply for accreditation. Accreditation enables centers to gain access to VA grants and Wounded Warrior Project benefits, both of which are discussed later.

Certified Therapeutic Riding Instructor
The Certified Therapeutic Riding Instructor (CTRI) designation is the most versatile. It enables ground-based and riding programs. Centers looking to offer EAL and TH/TR Programs can ask instructors to pursue the CTRI designation. The requirements and costs of the certification are as follows:

⇒ The CTRI designation takes roughly one year to complete. The application process entails an application fee, the completion of an online on-demand course, a Standards Exam, and a video review.
⇒ The application fee is $150 for PATH Intl Professional Members and $250 for non-members.
⇒ The Pearson Vue testing is $525 for Professional Members and $650 for non-members, and the Standards Exam which is required to be completed is $20 for Professional Members and $30 for non-members.
⇒ For Professional Members, the certification is costs roughly $740 in total (with the membership fee included) and $930 for non-members.

Equine Specialist in Mental Health and Learning
The Equine Specialist in Mental Health and Learning (ESMHL) designation is more specific than the CTRI in that ESMHL instructors are able to engage in EFP in collaboration with a mental health professional. Centers looking to offer EFP Programs should ask instructors to obtain the ESMHL or pursue an Eagala certification. The ESMHL requirements and costs are as follows:
⇒ Like the TRI designation, the ESMHL designation takes roughly one year to complete. The designation is only offered to PATH Intl members.
⇒ ESMHL programs are ground-based only. Curriculums include the oversight of a mental health professional or social worker. If working with the VA, the VA typically sends a social worker to the sessions with a veteran.
⇒ To obtain the ESMHL designation, instructors must attend a workshop which costs $600, not including travel. The workshop can be taken at a PATH Intl Accredited Center.
⇒ Instructors must submit a portfolio demonstrating their experience and application of what they learned during the workshop. The portfolio fee is $95.
⇒ The total cost of the ESMHL designation is roughly $785, including the $90 membership fee.

**PATH Center Accreditation**
Centers that become PATH Intl Accredited have access to VA grants and Wounded Warrior Project funding through PATH Intl. The accreditation process is as follows:

⇒ The cost of a 5-year accreditation is $900.
⇒ The application fee costs $150.
⇒ The yearly accreditation fee costs $150.
⇒ The first year’s cost is $300 (application fee + annual fee). Subsequent years cost $150.
⇒ The accreditation tends to pay for itself in that the Center can then access grants for programming and equipment. The Wounded Warrior Project also offers a benefit of $75 per veteran per session for 10 sessions, which totals $750 each.

**Eagala Certifications and Accreditation**
Eagala’s focus is on mental health and instructors who obtain an Eagala certification typically run Equine-Facilitated Psychotherapy programs. Eagala program curriculums are always ground-based and include an equine specialist and a mental health professional. The sessions are one-on-one with the veteran and the model views the horse as a metaphor for the obstacles a veteran may face in their life. Eagala believes that the individual is their own best solution to their personal challenges and that horses enable individuals to work through those challenges.

**Eagala Certification**
Eagala offers certifications to both equine specialists and mental health professionals. The requirements for equine specialists and mental health professionals differ. This section will focus only on the requirements for the equine specialist.

⇒ For a program to be considered Eagala certified, only one member of the treatment team needs to hold an Eagala designation, and that person is typically the equine specialist.
⇒ As a prerequisite, the equine specialist is required to have 6000 hours of hands-on experience with horses. 6000 hours translates to three full-time years of work with horses.
⇒ The equine specialist must also have 100 hours of continuing education, 40 ours of which must be obtained within the past two years.
The continuing education may include videos by Parelli or Clinton Anderson on natural horsemanship along with other trainings.

A professional development portfolio is required. In the portfolio, the equine specialist must describe their experience with horses and incorporate their learnings from their continuing education.

Once the equine specialist has completed the prerequisites, they are eligible to enroll in a 5-day training at an Eagala facility which costs $2500, not including travel. The facilities are located throughout the country.

Upon completion of the training, the equine specialist must also complete a 75-question assessment and obtain a 90% or better.

The designation requires 20 hours of ongoing continuing education every two years. The continuing ed can be obtained through attending conferences, which are typically three days, and cost $650, not including travel. Online independent study is also permitted.

The certification renewal fee every two years is $195. Equine specialists can renew through attending another $2500 training for $595 or through completion of a skillset training for $950 for the first time and $450 thereafter. The continuing education cost averages roughly $300 every two years if the equine specialist engages in self-study.

**Eagala Military Services Designation**

Eagala offers a Military Services Designation to centers that work with veterans. The designation enables the center to receive funding directly through Eagala from the VA’s Adaptive Sports Grant.

For a center to receive the Military Services designation, both the equine specialist and the mental health professional must be Eagala certified. Upon completion of the Eagala certification, the team can work toward the Military Services designation.

The team must undergo military culture training either through Eagala, third-party trainings, or through direct experience as military personnel or working with the military. The cultural competency requires 30 hours of training.

The team must also have 30 hours working with the military either through an existing veterans’ program or through other work experience.

The mental health professional must complete 80 clinical hours working with military personnel and must have a letter of recommendation.

Once the center is Military Services designated, they are eligible for the VA Adaptive Sports Grant which pays for six sessions. The VA provides compensation for the veteran’s session as well as compensation to the facility.

The Military Services designation costs $55 for each individual and $250 for the facility every two years.
Applying the best practices gathered, what should a sample program design entail?

Case Study: Intro to Horsemanship Program at Thorncroft Equestrian Center

All of the information in this section demonstrates the application of the best practices gathered combined with the results of a 15-question survey distributed to veterans in the Philadelphia area to inform the design of Thorncroft Equestrian Center’s new Intro to Horsemanship Program for veterans.

Background of Thorncroft Equestrian Center

Thorncroft Equestrian Center was founded in 1969 in Malvern, PA. It is one of the oldest therapeutic riding centers in the US. While Thorncroft specializes in working with children and adults with mental and physical disabilities, the center also offers lessons to beginner and intermediate hunter-jumper and dressage riders. The facility is set on 70 acres with 30 horses, two indoor riding arenas, 24 instructors and over 150 volunteers.

Thorncroft has worked with veterans in the past, primarily through a partnership with the Coatesville VA. The VA provides transportation to the lessons and veterans are invited to either ride or groom the horses depending on their physical condition. An instructor leads the lesson with the help of volunteers as spotters and a VA social worker. Given Thorncroft’s history of working with veterans and extensive experience in the therapeutic riding space, a larger, more developed program for veterans is a natural fit.

Thorncroft is a PATH Intl accredited facility. While most of the instructors hold PATH Intl certifications, a few are certified through Eagala. With this in mind, it will not be necessary for the instructors to obtain additional designations to work with veterans through the pilot Intro to Horsemanship Program. Military culture training, however, may become a future requirement of instructors and volunteers if the pilot is successful.

The Intro to Horsemanship Program will be launched as a pilot program in September 2020, incorporating many of the best practices gathered through this research. The primary goal is to develop a cadre of veterans who will become future advocates and volunteers for additional programs. The cadre of advocates will enable Thorncroft to create a veteran-focused environment where camaraderie-building and networking are possible. The program will allow each participant to set their own individualized goals and will maintain enough curricular diversity and flexibility to ensure each participant is able to focus on their areas of interest. Thorncroft will offer the program one evening per week at two separate time slots, for six weeks. If the program is successful, additional programs will be offered to allow participants in the pilot to continue to advance their skills and for new participants to learn about horsemanship.

The survey results that follow helped to inform the Intro to Horsemanship Program’s design. The results are direct feedback from veterans in the Philadelphia area and could be used to guide programmatic development at other centers. In addition to the survey results, the Intro to Horsemanship Program’s structure, curriculum, outcomes, and resources are provided.
Survey Results
A survey was utilized to gauge the interest-level and preferences of veterans in learning about horses and how to ride. The results informed the development of the Intro to Horsemanship Program. Of the 48 individuals who completed the survey, 41 were veterans and 7 were civilians interested in volunteering to help administer the program.

While the results are influenced by the fact that the survey was framed for those interested in learning about horses and how to ride, the receptivity to the pilot program is strong.

83% of the veterans surveyed indicated that they are either extremely likely or somewhat likely to participate in the Intro to Horsemanship Program.

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<th>Likelihood of veterans to participate in the Program by gender</th>
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While 83% of respondents indicated that they are either extremely likely or somewhat likely to participate in the Intro to Horsemanship Program, only 27 of the 34, or 67% said that they would like to be contacted with more information about the Program.

Only the responses from the 27 respondents who would like to be contacted were analyzed for program development. The results are detailed below:

⇒ Of the veterans who would like to be contacted with further details:
  - 44% are extremely likely to participate and 56% are somewhat likely
  - 78% are men and 22% are women
  - The majority, 16 individuals or 59%, are between 31-40; 3 are between 21-30; 5 are 41-50; 3 are over 50 years old
A program just for veterans would be well attended: 22 of the 27 respondents likely to participate would like the program to be with other veterans

A family night is also an option in addition to a veterans-only program: 10 indicated they would like to participate with a spouse/partner; 7 indicated they would like to participate with their children or other family members

Most of the veterans interested in participating have limited to no experience around horses
Most of the veterans would like to learn **basic to intermediate riding skills, Western riding style, horse behavior and herd dynamics, and horse care and first aid**

Areas of interest of veterans who would likely participate in the Program and would like to be contacted

- Most of the veterans likely to participate would be interested in a **program between 4 and 8 weeks**
- 16 of the 27 veterans likely to participate would definitely travel to Malvern for the program and 8 would probably make the trip
- **4 veterans** who are likely to participate in the program **would like to volunteer only**
- 7 of the veterans likely to participate would definitely participate in future programs and 12 would probably participate in future programs
Structure
The Intro to Horsemanship Program will allow Thorncroft to test and learn what veterans are looking for from a Horsemanship Program and design future programs to meet veterans’ desired goals and objectives.

⇒ **Target population and program offered:**
  - The program was advertised as a camaraderie-based activity for local veterans to learn horsemanship skills with other veterans.
  - The program offered will be a group activity focused on skill-building for veterans only. Future programs may include a family night for spouses/partners and children.
  - The goal of the program is to encourage veterans to learn horsemanship skills and return to the center for future programs or as volunteers. The center would like to cultivate a cadre of veterans who can be ambassadors for the benefits of working with horses.

⇒ **Session frequency, timing, and attendance:**
  - The program will run for six weeks on Wednesday evenings from 5:30-8. Participants will choose between the 5:30 and 7pm time slot to keep the groups small.
  - Each session will last for one hour with a break between sessions at 6:30pm to allow time for dinner and networking.
  - Attendance will be taken to encourage accountability and ongoing participation.

⇒ **Environment, policies, and procedures:**
  - The program will be the only programming on Wednesday evenings. Veterans will have the center to themselves.
  - Food will be provided in a shared space outside the riding ring for vets to socialize and also retreat to if they need a break.
  - Barn rules and policies will be reviewed during the introductory session and a copy will be provided to each veteran along with a liability release form.
  - All participants will be made aware of the equipment required for safety, which includes boots and a helmet. Helmets will be provided to those who do not have one of their own.
  - The population surveyed indicated that they do not require transportation to Malvern. Transportation may be required for future programs.
Curriculum
The goal of the program is to introduce veterans to horsemanship and provide them with the foundational skills required to progress to future programs or return to the center as volunteers. The enable the achievement of individual goals and objectives, such as, learning basic riding skills or horse care and first aid, the curriculum is intentionally flexible and can be adapted to the goals stated by each veteran at program launch.

⇒ **Week 1:** Meet and greet, tour of the farm, observe horses in the paddock, discuss equine behavior and herd dynamics. Learn to safely approach, halter and lead a horse in the stall or paddock. Assign horses for 6-week duration.

⇒ **Week 2:** Practice haltering, leading and placing horse into cross-ties. Learn to properly groom assigned horse in addition to performing a basic wellness assessment and hoof care. Discuss particulars of size, breed, temperament and color of assigned horses.

⇒ **Week 3:** Learn the basics of tacking and untacking. Practice grooming and hoof care.

⇒ **Week 4:** Practice haltering, grooming, wellness assessment & tacking assigned horse. Learn to safely and effectively lead horse over and around obstacles in the arena at the walk and trot.

⇒ **Week 5:** Those interested in riding and below the weight limit will learn to mount and walk. Those interested in ground-work and/or over the weight limit will learn to round pen.

⇒ **Week 6:** Riding group will tack up and practice at the walk over poles. Ground-based group will continue learning round penning. Bring group back together for concluding remarks and to discuss potential future programs and volunteer opportunities.

Outcomes
The Intro to Horsemanship Program will be an individualized goals-based program. The main purpose is to encourage veterans to learn a new skill and become ambassadors for Thorncroft and the benefits of working with horses. The best way to achieve this goal is to allow participants to independently determine what they would like to get out of the program.

⇒ Participants will be provided with an enrollment form at the program’s outset. The form will ask them to list their goals for the program which can include any of the following:
  - Develop horsemanship skills (check all that apply):
    - Grooming; Tacking; First aid; Herd dynamics; Walk; Trot; Canter; Other:
  - Meet other local veterans
  - Gain self-confidence through learning a new skill
  - Build the skills required to become a volunteer for future programs

⇒ Thorncroft’s overarching intended outcome for the program is the formation of a cadre of veterans who return to the farm as volunteers for future veterans’ programs.

Resources
The Intro to Horsemanship Program will initially be funded through restricted gifts made to the farm for veterans. If the pilot program is successful and future programs are launched, the goal is to fund then through VA grants, Foundation grants, and private donations. Two current Thorncroft instructors will run the program. Veterans affiliated with the farm were asked to volunteer. Additional volunteers may be required depending on the program size.
Recommendations for future research

The recommendations for future research are closely related to the limitations of this project.

⇒ **Interview a larger sample of EAT programs for veterans to improve the validity of the commonly used best practices.** Create a list of PATH Intl and Eagala accredited centers with EAT programs for veterans and interview or survey at least 75% of them or a randomized sample of programs. Four of the five centers interviewed for this project are accredited, however, the sample size is small.

⇒ **Interview local veterans to determine their perceptions of EAT programs, their interest level in participation, and what they would like to learn.** While the survey was a convenient method to gauge the interest level and areas of interest of veterans in the Philadelphia-area, it failed to call out why many veterans do not want to participate in Equine-Assisted Therapy programs and what could improve their engagement and interest levels.

⇒ **Interview veterans who are current participants in EAT programs.** Conversations with veteran participants either through interviews or focus groups could help existing programs improve and new programs focus on best practices as noted by veterans rather than by staff members. Direct feedback from veterans could also improve the marketability and attraction of new and existing programs as they would cater directly to the veteran population.

⇒ **Interview EAT Program funders.** A better understanding of what funders are looking for from an outcomes and results perspective could improve program design and access to resources.

Conclusion

As EAT programs for veterans continue to evolve, this research should help inform program development and implementation. Whether a center chooses to offer EFP, EAL, or TH/TR, the best practices detailed can be leveraged to ensure that programs are effective in delivering on their intended outcomes.

Programs with a clear Structure, detailed Curriculum, stated Outcomes, and understanding of the Resources required for implementation have the best chance at success. While programs will vary by center, location, and the veteran population served, the commonly used best practices and the certifications necessary to offer a credible program provide a useful framework for implementation. The Intro to Horsemanship Program offered by Thorncroft Equestrian Center can be used as a guide for new and existing programs.
Appendix

1) Interview protocol
2) Survey protocol
3) Follow-up email
4) Survey results
5) PTSD (PCL-5) Scale
Interview protocol

Disclosure: The interview protocol evolved as I became more informed of the types of questions to ask. Most interviewees were asked a subset of the questions below. Not all were asked the same questions due to time constraints and the direction of the conversation.

Introduction:
Hello, thank you for taking the time to speak with me today. As I mentioned, I am a second year Master of Public Administration student at Penn and am currently in the process of gathering information about equine therapy programs for veterans for a final capstone project. I would like to partner with an existing equestrian facility in the Philadelphia area to implement a program and plan to use the information gathered to help inform the program’s development.

Before we get started, do you mind if I record this conversation? The information we discuss will be incorporated into the written component of my project.

Background:
1. Let’s talk about the programs your center offers and how you got started. How did you come to work with veterans?
2. Do you work with veterans with PTSD specifically or are your programs open to all vets?

Structure:
3. What types of programs do you offer? Equine-Facilitated Psychotherapy, Equine-Assisted Learning, or TH/TR?
4. How did you decide to offer those programs?
5. Tell me about the structure. Are the sessions weekly? Group-based? For how long?
6. How do you manage other programs while the veterans’ programs are taking place?
7. How do you manage attendance and retention? Have you had any issues getting vets to participate consistently?

Curriculum:
8. Let’s talk about your curriculum and how you keep vets engaged. Did you create your curriculum, or do you use a third party?
9. Are your programs ground-based or do they involve riding?
10. Do you engage a mental health professional during your sessions?
11. What types of activities do you incorporate?
12. What types of horses do you use?
13. Do you allow veterans to partner with the same horse for the duration of the program?
14. Do veterans have the opportunity to return to your center even after completion of the programs offered?
Outcomes:

15. What are the outcomes you are trying to achieve?
16. How did you structure your program to enable the achievement of those outcomes?
17. How do you measure outcomes? Self-assessments, scales? And at what frequency?
18. Do funders ask about the program’s outcomes?

Resources:

19. How is your program funded?
20. Do you partner with local veteran organizations to market and fund your programs?
21. How did you cultivate those relationships?
22. How do you advertise your program and what have you found to be the most successful?
23. Let’s pivot to certifications and staff. How do you select and train your staff? Do you require that they all have certifications?
24. Do they undergo military culture training? If so, which resources do you use for that?
25. How do you manage your volunteers? Do you train them too?

Conclusion:

26. Is there anything else I should consider when implementing an equine therapy program that we didn’t cover?

Thank you for your time and for providing me with all of this information. I appreciate your insights and will circle back with you if I have any additional questions.
Survey protocol

Introductory email:

Hi all,

An organization in Malvern is building out a free camaraderie-based Intro to Horsemanship Program for Veterans. If you are interested in learning about horses and how to ride, or in volunteering to help with the program, please take the 5-minute, 15-question survey linked below.

By clicking on the link, you are consenting to participate in the survey. Your response will inform the program's design and development.

Intro to Horsemanship for Veterans Survey

Thank you for your participation!

Survey

1. Would you like to learn about horses and how to ride with other veterans?
   a. Definitely yes
   b. Probably yes
   c. Might or might not
   d. Probably not
   e. Definitely not

2. What would you like to learn? (check all that apply)
   a. Grooming
   b. Tacking
   c. Horse health and first aid
   d. Horse behavior and herd dynamics
   e. Groundwork (obstacle courses on foot, round penning)
   f. Basic riding skills (walk and trot)
   g. Intermediate riding skills (canter)
   h. English riding style
   i. Western riding style
   j. I don’t want to learn about horses or how to ride
   k. I don’t know
   l. Other:

3. How likely are you to participate in a free camaraderie-based Intro to Horsemanship program for veterans?
   a. Extremely likely
   b. Somewhat likely
   c. Neither likely nor unlikely
d. Somewhat unlikely
   e. Extremely unlikely

4. Who would you like to participate in the program with you? (check all that apply)
   a. Other veterans
   b. Female veterans only
   c. Male veterans only
   d. Spouse or partner
   e. Children or other family members
   f. I don’t want to participate
   g. I don’t know
   h. Other:

5. How much time are you willing to commit to the program? We are tentatively targeting a September 2020 start. (check all that apply)
   a. One evening per week for 4 weeks
   b. One evening per week for 6 weeks
   c. One evening per week for 8 weeks
   d. No time at all
   e. I don’t know
   f. Other:

6. Would you participate in additional riding opportunities after completing the Intro to Horsemanship program?
   a. Very interested
   b. Definitely yes
   c. Probably yes
   d. Might or might not
   e. Probably not
   f. Definitely not

7. Are you interested in volunteering at the Intro to Horsemanship program and future programs?
   a. Yes, I would like to participate first and volunteer for a future program later
   b. Yes, I would like to volunteer only
   c. No, I would not like to volunteer
   d. I don’t know
   e. Other:

8. Would you travel to Malvern, PA for the Intro to Horsemanship Program? (either to participate or as a volunteer)
   a. Definitely yes
   b. Probably yes
   c. Might or might not
   d. Probably not
   e. Definitely not
9. Would you require transportation to Malvern, PA?
   a. Yes
   b. No
   c. I don’t know
   d. Other:

10. Please select the best description of your current horsemanship skills:
    a. I have never been around a horse
    b. I am uncomfortable around horses but want to learn a new skill
    c. I am comfortable around horses but have never ridden
    d. I am a novice rider (walk only)
    e. I am a beginner rider (walk and trot)
    f. I am an intermediate rider (walk, trot, canter)
    g. I am an advanced rider (walk, trot, canter, jump)
    h. I don’t know
    i. Other:

11. Please indicate if you are a veteran:
    a. I am a veteran
    b. I am not a veteran

12. Please indicate your gender:
    a. Male
    b. Female
    c. Prefer not to disclose

13. Please indicate your age group:
    a. Under 20 years old
    b. 20-30 years old
    c. 31-40 years old
    d. 41-50 years old
    e. 51-60 years old
    f. 61-70 years old
    g. Over 70 years old
    h. Prefer not to disclose

14. Please provide any additional feedback that should be considered during the development of the Intro to Horsemanship Program:
    a. Feedback:
    b. I don’t have any feedback

15. Would you like to be contacted with more information about the Intro to Horsemanship Program?
Follow-up email, sent to those who provided their email address on June 30, 2020:

Hello,

Thank you for responding to our Intro to Horsemanship Program survey. The program will be offered through Thorncroft Equestrian Center based in Malvern, PA. Thorncroft is committed to working with veterans and our hope is that this will be the first program of many for the service members of our community. While the program is still in development, based on your feedback, we plan to focus on natural horsemanship and beginner riding skills. We are targeting a September kickoff and will be in touch with additional details as the date approaches. In the meantime, have a wonderful summer, and stay safe and healthy.

We look forward to welcoming you to the farm!

Thorncroft Equestrian Center
Survey Results

As of June 6, 2020
Would you like to learn about horses and how to ride with other veterans?
Would you like to learn about horses and how to ride with other veterans?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Definitely yes</td>
<td>44%</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Probably yes</td>
<td>30%</td>
<td>14</td>
</tr>
<tr>
<td>3</td>
<td>Might or might not</td>
<td>17%</td>
<td>8</td>
</tr>
<tr>
<td>4</td>
<td>Probably not</td>
<td>9%</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Definitely not</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>46</td>
</tr>
</tbody>
</table>
What would you like to learn?
(check all that apply)
How likely are you to participate in a free camaraderie-based Intro to Horsemanship program for veterans?

- 33% Extremely likely (15)
- 49% Somewhat likely (22)
- 16% Neither likely nor unlikely (3)
- 10% Somewhat unlikely (4)
- 2% Extremely unlikely (1)
How likely are you to participate in a free camaraderie-based Intro to Horsemanship program for veterans?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Extremely likely</td>
<td>33%</td>
<td>15</td>
</tr>
<tr>
<td>2</td>
<td>Somewhat likely</td>
<td>49%</td>
<td>22</td>
</tr>
<tr>
<td>3</td>
<td>Neither likely nor unlikely</td>
<td>7%</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Somewhat unlikely</td>
<td>9%</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Extremely unlikely</td>
<td>2%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>45</td>
</tr>
</tbody>
</table>
Who would you like to participate in the program with you?
(check all that apply)
How much time are you willing to commit to the program?  
(check all that apply)
How much time are you willing to commit to the program? (check all that apply)

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>One evening per week for 4 weeks</td>
<td>28%</td>
<td>17</td>
</tr>
<tr>
<td>2</td>
<td>One evening per week for 6 weeks</td>
<td>25%</td>
<td>15</td>
</tr>
<tr>
<td>3</td>
<td>One evening per week for 8 weeks</td>
<td>28%</td>
<td>17</td>
</tr>
<tr>
<td>4</td>
<td>No time at all</td>
<td>2%</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>I don't know</td>
<td>10%</td>
<td>6</td>
</tr>
<tr>
<td>6</td>
<td>Other:</td>
<td>7%</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>
Would you participate in additional riding opportunities after completing the Intro to Horsemanship program?

20% Definitely yes
51% Probably yes
18% Might or might not

- Definitely yes (9)
- Probably yes (23)
- Might or might not (8)
- Probably not (4)
- Definitely not (1)
Would you participate in additional riding opportunities after completing the Intro to Horsemanship program?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Definitely yes</td>
<td>20%</td>
<td>9</td>
</tr>
<tr>
<td>2</td>
<td>Probably yes</td>
<td>51%</td>
<td>23</td>
</tr>
<tr>
<td>3</td>
<td>Might or might not</td>
<td>18%</td>
<td>8</td>
</tr>
<tr>
<td>4</td>
<td>Probably not</td>
<td>9%</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Definitely not</td>
<td>2%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>45</td>
</tr>
</tbody>
</table>
Are you interested in volunteering for the Intro to Horsemanship program or future programs?

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, I would like to participate first and volunteer for a future program later</td>
<td>19</td>
</tr>
<tr>
<td>I don’t know</td>
<td>10</td>
</tr>
<tr>
<td>Yes, I would like to volunteer only</td>
<td>8</td>
</tr>
<tr>
<td>No, I would not like to volunteer</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
</tr>
</tbody>
</table>
Are you interested in volunteering for the Intro to Horsemanship program or future programs?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes, I would like to participate first and volunteer for a future program later</td>
<td>41%</td>
<td>19</td>
</tr>
<tr>
<td>2</td>
<td>Yes, I would like to volunteer only</td>
<td>17%</td>
<td>8</td>
</tr>
<tr>
<td>3</td>
<td>No, I would not like to volunteer</td>
<td>15%</td>
<td>7</td>
</tr>
<tr>
<td>4</td>
<td>I don't know</td>
<td>22%</td>
<td>10</td>
</tr>
<tr>
<td>5</td>
<td>Other:</td>
<td>4%</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>46</td>
</tr>
</tbody>
</table>
Would you travel to Malvern, PA for the Intro to Horsemanship program (either to participate or volunteer)?

- Definitely yes: 22
- Probably yes: 14
- Might or might not: 6
- Probably not: 2
- Definitely not: 2
Would you travel to Malvern, PA for the Intro to Horsemanship program (either to participate or volunteer)?

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Definitely yes</td>
<td>48%</td>
<td>22</td>
</tr>
<tr>
<td>2</td>
<td>Probably yes</td>
<td>30%</td>
<td>14</td>
</tr>
<tr>
<td>3</td>
<td>Might or might not</td>
<td>13%</td>
<td>6</td>
</tr>
<tr>
<td>4</td>
<td>Probably not</td>
<td>4%</td>
<td>2</td>
</tr>
<tr>
<td>5</td>
<td>Definitely not</td>
<td>4%</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>46</strong></td>
</tr>
</tbody>
</table>
Would you require transportation to Malvern, PA?
Please select the best description of your current horsemanship skills:

- 15: I am comfortable around horses but have never ridden a horse
- 8: I have never been around a horse
- 8: I am a novice rider (walk only)
- 5: I am an advanced rider (walk, trot, canter, jump)
- 4: I am a beginner rider (walk and trot)
- 3: I am uncomfortable around horses but want to learn a new skill
- 2: I am an intermediate rider (walk, trot, canter)
- 1: Other:
- I don't know
Please select the best description of your current horsemanship skills:

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I have never been around a horse</td>
<td>17%</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>I am uncomfortable around horses but want to learn a new skill</td>
<td>7%</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>I am comfortable around horses but have never ridden a horse</td>
<td>33%</td>
<td>15</td>
</tr>
<tr>
<td>4</td>
<td>I am a novice rider (walk only)</td>
<td>17%</td>
<td>8</td>
</tr>
<tr>
<td>5</td>
<td>I am a beginner rider (walk and trot)</td>
<td>9%</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>I am an intermediate rider (walk, trot, canter)</td>
<td>4%</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>I am an advanced rider (walk, trot, canter, jump)</td>
<td>11%</td>
<td>5</td>
</tr>
<tr>
<td>8</td>
<td>I don't know</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>Other:</td>
<td>2%</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
<td>46</td>
</tr>
</tbody>
</table>
Please indicate if you are a veteran:
Please indicate your gender:

- Male: 32
- Female: 14
- Prefer not to disclose: 0
Please indicate your age group:
Please indicate your age group:

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Under 20 years old</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>20-30 years old</td>
<td>15%</td>
<td>7</td>
</tr>
<tr>
<td>3</td>
<td>31-40 years old</td>
<td>52%</td>
<td>24</td>
</tr>
<tr>
<td>4</td>
<td>41-50 years old</td>
<td>20%</td>
<td>9</td>
</tr>
<tr>
<td>5</td>
<td>51-60 years old</td>
<td>7%</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>61-70 years old</td>
<td>4%</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>Over 70 years old</td>
<td>2%</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>Prefer not to disclose</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>46</td>
</tr>
</tbody>
</table>
Would you like to be contacted with more information about the Intro to Horsemanship program:

- Yes: 35
- No: 8
PTSD Checklist for *DSM-5* (PCL-5)

**Version date:** 11 April 2018


**URL:** https://www.ptsd.va.gov/professional/assessment/adult-sr/ptsd-checklist.asp

**Note:** This is a fillable form. You may complete it electronically.
**Instructions:** Below is a list of problems that people sometimes have in response to a very stressful experience. Please read each problem carefully and then circle one of the numbers to the right to indicate how much you have been bothered by that problem in the past month.

<table>
<thead>
<tr>
<th>In the past month, how much were you bothered by:</th>
<th>Not at all</th>
<th>A little bit</th>
<th>Moderately</th>
<th>Quite a bit</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Repeated, disturbing, and unwanted memories of the stressful experience?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. Repeated, disturbing dreams of the stressful experience?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. Feeling very upset when something reminded you of the stressful experience?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Avoiding memories, thoughts, or feelings related to the stressful experience?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>8. Trouble remembering important parts of the stressful experience?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>9. Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>10. Blaming yourself or someone else for the stressful experience or what happened after it?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>12. Loss of interest in activities that you used to enjoy?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>13. Feeling distant or cut off from other people?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>14. Trouble experiencing positive feelings (for example, being unable to feel happiness or having loving feelings for people close to you)?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>15. Irritable behavior, angry outbursts, or acting aggressively?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>16. Taking too many risks or doing things that could cause you harm?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>17. Being “superalert” or watchful or on guard?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>18. Feeling jumpy or easily startled?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>19. Having difficulty concentrating?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>20. Trouble falling or staying asleep?</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>