Training College Police Officers on PTSD using the DSM-5 as part of an Antiterrorism and Threat Assessment Strategy

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Abstract
The Virginia Tech Shootings and other acts of gun violence on campuses across the country are painful psychological reminders of the perils for campus police connected with college life in the 21st Century. The clinical forensic problems stemming from these human actions can result in the same character of psychological sequelae (e.g., fears) observed in the wake of a terrorist act. Fear is often a symptom of Post-traumatic Stress Disorder (PTSD), which is diagnosed by using a mental disorder assessment and treatment tool known as the Diagnostic Statistical Manual-5 (DSM-5). Threat assessment strategies for college police officers take into consideration the public safety point of view and must be expanded to intervene at multiple points as a violent event unfolds on campus. The DSM-5 provides mental health professionals with a psychologically-relevant, focused threat assessment framework required for collaborative work with college police officers. This paper explores the nexus between threat assessment, antiterrorism, PTSD, and college police officers. The paper reviews ways in which factors that reduce the risk for PTSD can be consistently incorporated into campus police policies (i.e., policy including elements that reduce the risk of PTSD for officers) and into the decisions affecting risk and threat assessment operations related to public safety. As the primary threat assessment and interventionist unit on campus, college police must be sensitized to the need for working collaboratively with other mental health disciplines in assessing for PTSD with a culturally responsive review of PTSD. Implications for crafting an expanded campus terrorism response with a focus on reducing post-traumatic stress reactions in responders, through the preparation of college police officers, are highlighted.

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Introduction

The 2014 campus shootings at UC Santa Barbara and Seattle Pacific University point to a need for campus police to become increasingly responsive to the anticipated psychological costs among members of the campus community that are associated with these types of incidents. When such incidents occur, it is difficult to determine from the onset whether these acts are motivated by terrorism or some other random form of violence in response to a personal grievance. The media coverage of campus tragedies reflexively reveals a hunt for and often speculates about the role that a perpetrator’s mental health status may have played during these incidents. Still, any act of terrorism is projected to have a negative impact on the psychological functioning of campus life. The core of an effective campus police response to a terrorist attack is to remain calm and safety focused.

One thing seems clear, trauma can be an anticipated psychological reaction observed over an extended period of time or suppressed, becoming evident only when symptoms surface or persist in the weeks and months following a campus shooting incident.

In many cases, campus shooting incidents’ immediate psychological toll may be observed in the clinical residual reactions noted by widespread mental health conditions that continued and, in some cases, still continue for weeks and months afterwards. That was the case at UC Santa Barbara, where a review of the video made by the UC Santa Barbara shooter revealed a person motivated by a distorted need for revenge, as well as a desire to create extreme fear in the targeted victims. The fear is a natural response to the perceived threat to safety (i.e., physical threat) that is a basic motivational need. Maslow’s hierarchy of needs explains safety in terms of the security one attaches to the body. Safety represents a core function that can be unsettled in the wake of a campus shooting incident; therefore, personal safety is a high priority from a public safety standpoint before, during and after a crisis (Maslow, 1943).

There are several campus threat assessment lessons learned as a result of well-documented incidents of violence (e.g., 9/11) and natural disasters (e.g., Hurricane Sandy) (Neria & Shultz, 2012). If properly trained, campus public safety officers can provide a critical perspective in both crisis prevention and intervention. Their role as first responders means that they are actively involved in threat assessments as the incident unfolds. (Hollister, Scalora, Hoff, & Marquez, 2014). As established members of the campus, the institution where they serve allows campus police to remain highly attuned to diverse public safety needs—which can involve mental health, medical, and social services—with access to other critical support systems.

This article examines the nexus between threat assessment, antiterrorism, PSTD, and college police officers. The author provides a review of antiterrorism insights for campus police, offers a discussion of terrorism and college police, and identifies a need for a psychological perspective for an antiterrorism threat assessment strategy. A section is devoted to Post-traumatic Stress Disorder (PTSD), campus
police policies, and threat assessment operations related to public safety. In addition, terrorism insights for campus and college police’s interdisciplinary work with mental health providers in assessing for PTSD is reviewed. Finally, implications for research, practice, and training are discussed.

**Antiterrorism Insights for Campus Police**

The awareness resulting from two wars in the Middle East have taught military and political leaders to include PTSD into the cost equation for fighting any future wars. The attacks of 9/11 resulted in the loss of 2,996 lives, including those of the 19 hijackers. In post-9/11 research, Neria, DiGrande, & Adams, (2011) reported that individuals with greater contact to 9/11 had substantially higher PTSD issues in the following 10 years, with the prevalence of PTSD symptoms in the ten years following the event. A survey of 71,000 registrants indicates that PTSD symptoms rose 5% to 19% in the two to three years following the events of 9/11 (Twemlow, Sacco, Ramzy, & Nadia, 2011). PTSD is correlated with other factors as well (e.g., socioeconomic status [SES], social support, loss of life); for example, Yehuda (2002) demonstrated that lower SES relates to an increased risk for PTSD. Chemtob, Madan, Berger, & Abramovitz, (2011) assessed the relationship between different types of trauma exposure, (PTSD) symptoms, and suicidal ideation among New York City adolescents one year after the World Trade Center attacks. They found that PTSD was associated with increased risk for suicidal ideation. In addition, exposure to attack-related traumatic events increased risk for both suicidal ideation and PTSD. Because there is a demonstrated nexus between terrorism and unwanted psychological responses in victims, it is important to consider the inclusion of antiterrorism strategies for police actions that are aimed at potential difficulties like PTSD.

By definition, antiterrorism is an irregular approach to irregular psychological warfare (Johnson, 2012). The most appropriate strategic approach for addressing PTSD risk is to incorporate human and technological resources in preparation for traumatic events. This means attempting to strengthen the psychological capability (i.e., start the recovery process from the traumatic event or difficulty) of potential first responders through training by both civilian (e.g., mental health professionals) and campus police.

There are four mental-health related insights gained from 9/11. First, threats from abroad and home are unending. The traditional mindset of “winning the war” or “declaring victory” is nonexistent in antiterrorism. Second, the current human and technology resources must be refashioned to integrate campus police threat assessment and interventions with the PTSD changes contained in the DSM-5. Third, campus police responses and the DSM-5 can be applied for “what if” or clinical decision-making analyses that are utilized for the good of both mental health professionals and public safety. Actionable insights can be gleaned through campus exercises, which calibrate response preparation models with existing information sources (Johnson & Johnson, 2012).
Nexus Between Antiterrorism, Threat Assessment, PTSD, and College Police Officers

In the 21st Century, the reality of random violence and terrorism fuels a major concern for threat assessment professionals, irrespective of the settings in which they provide public safety. The Virginia Tech, Seattle Pacific University, and UC Santa Barbara incidents are consistent with the data indicating that approximately 65% of homicides in the United States are committed using a firearm (Karch, Logan, & Patel, 2011). Unfortunately, a threat assessment of gun violence on a college campus is especially challenging because it necessitates identifying an incident with a lower rate of occurrence despite the aforementioned high profile campus shootings.

Despite the inherent threat assessment difficulties posed by this low prevalence condition, there are two reasons why campus police officers must assume a proactive role in antiterrorism (i.e., defensive) efforts. First, these types of violent events can result in increased risk for major psychological harm to victims. Second, prevention strategies are clearly needed when embracing a more all-encompassing definition of the role of promoting public safety (i.e., physical and psychological). Since terrorism remains a significant security risk, antiterrorism efforts needed to be implemented. As such, campus police must be able to make decisions based on a number of theoretically-grounded data sources, with public safety minds unclouded by cultural biases or misperceptions. Theories exploring the mindset of individual terrorists are expected to help facilitate the development of proactive public safety measures such as psychologically-relevant response options that police can use as first responders. Antiterrorism cannot be successful in the absence of evidence-based conclusions related to the mindset (decision making and fear goals) that fuel terrorist attacks. The mindset of a terrorist is insufficiently studied from a threat assessment standpoint, and the data collected from this assessment could readily assist campus police (i.e., desire to create fear) (Johnson, 2013). Despite this threat assessment disadvantage, the development of risk management algorithms must rely on criminological and psychological theory, many of which have been validated through previous research (Ashish et al., 2011). However, campus public safety personnel do not use tested algorithms in order to forecast the unpredictable acts of terrorist. These findings are inextricably yoked to practice and training of campus police mainly because of the puzzling decision making (e.g., mix of revenge, religion, and perception of persecution, etc.) of a terrorist may not conform to some Western-based conceptualization models, and may require cross-cultural models (Hamilton, 2005). Western criminology and psychological frameworks may have preventive utility when it comes to antiterrorism from a Western perspective due to the terrorists’ objectives which is designed to create chaos and fear that they want to exploit in some way.

From a public safety standpoint, awareness of the terrorists’ desire to create a fear response should function as a call to action for campus police. In this case, knowledge about PTSD in a campus-based perspective can provide a circumscribed, culturally-responsive explanation of the cognitive
framework and psychosocial motives related to recurrent acts of terrorism. This information can also be used in the campus policing practice by interrupting and obstructing the potential psychological harm stemming from would-be terrorists or shooting incidents. Since 9/11, Homeland Security has enlisted campus police officers in the domestic counterterrorism efforts. Therefore, campus police practices must also be expanded to integrate the psychological factors into broader Homeland Security antiterrorism efforts as it relates to the mindset of a terrorist (Johnson, 2012).

**Terrorism, College Police, and the Need for a Psychological Perspective on Antiterrorism**

In contrast to counterterrorism, antiterrorism is a defensive approach used to combat terrorism from a campus police threat assessment perspective. The Eric Snowden case has made most Americans aware of increased government surveillance of computer and network activity. From a campus public safety antiterrorism viewpoint, what will be the impact of these practices on the psychological after-effects of an act of terror or a campus shooting incident? Although it is probably too early for definitive answers, there is justification for campus police to strategically develop a psychologically-responsive (i.e., antiterrorism) response. Why? Because arguably one of the greatest threats from an act of terror or shooting is the lack of education found in the campus stakeholders about the real threat posed by these acts. It can be argued that ignorance of the intention (e.g., chaos or fear) functions as a psychological resource for the terrorism by producing unwanted reactions (e.g., gaps in preparedness and potentially PTSD).

The persistent threat from terrorism presents an unrelenting demand on campus public safety resources on an international basis (Davis, Mariano, Pace, Cotton, & Steinberg, 2006; Marks & Sun, 2007; Patton & Violanti, 2006, as cited by Bailey & Cree, 2011). An appreciation of the psychological impact of terrorism is best recognized by the complicated and layered redundancy factors required for Homeland Security (HS) preparedness. Psychological injury may be less visible to first-responders than physical injury. Yet, education on how the onset of PTSD symptoms affects terrorism response systems must be incorporated into campus police officer training curriculum. Thus, both the provisions for developing interventions and the allocation of resources to improve competencies of campus police should address the psychological trajectories stemming from terrorism (Salguero, Cano-Vindel, Iruarrizaga, Fernandez-Berrocal, & Galea, 2011).

Acts of terror are likely to have an immediate effect on the prevalence and severity of psychological issues observed in targeted communities (e.g., college campuses). These consequences can be evaluated in the context of the subsequent disruptions to social and economic functioning where acts of terrorism have occurred (Costello et al., 2009; Fritze et al., 2008; Page & Howard, 2010, as cited by Doherty & Clayton, 2011). Recent research suggests that impacts of natural disasters include acute and post-traumatic stress disorder (Galea, Nandi, & Vlahov, 2005); somatic disorders (van den Berg, Grievink, Yzermans, & Lebret, 2005); major
depression (Marshall et al., 2007); and other problems such as drug and alcohol abuse, higher rates of suicide, and elevated risk of child abuse (Fritze et al., 2008; Doherty & Clayton, 2011). The globalization of terrorism has fueled a worldwide need for campus police to be trained in how to recognize, evaluate, and report issues relevant to PTSD. To date, little attention has been devoted to preparing campus police to assess psychological risks for these consequences during the regular course of their duties.

PTSD and the DSM-5 Related to Public Safety

Controversial changes and errors contained in The Diagnostic Statistical Manual of Mental Disorders-5th Edition (DSM-5) prompts a need for training of campus police as part of an institution-wide interdisciplinary team used to properly assess for PTSD. The release of the DSM-5 in 2013 came at a time when PTSD has primarily emerged as a major clinical disorder fueled by ongoing military campaigns and worldwide acts of violence (e.g., the Virginia Tech, UC Santa Barbara, Seattle Pacific University shooting incidents), which are painful reminders that exposure to trauma is not limited to warfare. Campus police as first responders need to be prepared.

PTSD cuts across cultures and international boundaries and outpaces the ability of a campus to manage the many problems associated with it. This is especially true for the clinical issues noted in the psychological sequelae of PTSD stemming from global terrorism. Complexity stems from a blend of cultural, economic, geopolitical, or historical trauma, paired with religious factors that often fuel these seemingly-senseless acts (Pole, Gone, & Kulkarni, 2008).

Campus police are part of a comprehensive Homeland Security (HS) effort to prevent and respond to terrorism, which usually involves risk assessment and risk management for the desired public safety results. Internationally, HS strategies must also reduce the mental health impact of terrorism (Homeland Security Council, 2005; Sauter & Carafano, 2005). Research demonstrates through prevalence rates that not everyone experiencing a life-threatening event goes on to develop PTSD as a clinical and forensic consequence of these acts (Hashemian et al., 2006; K. de Jong, Mulhern, Ford, van der Kam, & Kleber, 2000; Steel et al., 2005; Fox & Yang, 2000). However, individuals exposed to acts of terror are comparatively more vulnerable to developing PTSD than those experiencing some other violent trauma.

Campus police are confronted with a challenging, twofold public safety mission. First, they must prevent terrorism. Second, they must respond in advance of and in the aftermath to terrorist attacks. A terrorist only has to be successful once in order to achieve a desired psychological outcome of fear and chaos in the campus response. The terrorist mindset seeks to expand terror using any psychological means to create disorganization (Johnson, 2013).

Perhaps because campus policing threat assessment by definition has an unending objective to remain ahead of terrorists, resources to secure infrastructure or assess for threats far exceed those devoted to PTSD (Department of Defense, 2010). This observation forces a question: Can it be
assumed that any campus response system primarily dependent on human factors will remain psychologically effective in the wake of a terrorist attack? Psychological injury may be less visible than physical injury both to campus victims and among first responders. Evidence from Katrina and 9/11 suggests that local law enforcement systems were dysfunctional because public safety officers were incapacitated, both in the midst of and following disasters. Effective response required substantial redirected military support (Kapucu, Wart, Sylves, & Yuldashev, 2011).

Antiterrorism strategies used by campus police must integrate a psychoeducational component aimed at early recognition of PTSD symptoms as well as understanding the disorder’s impact on the terrorism response system (APA, 2000). Thus, antiterrorism objectives must include prevention, strategic intervention, and adequate preemptive public safety resource allocation. The art and science of simulation can provide guidance in improving psychological trajectories stemming from acts of terror (Salguero et al., 2011).

**Campus Police and the Transdisciplinary Work with Mental Health Disciplines in Assessing for PTSD**

There are several PTSD-relevant examples of acts of terror on campuses throughout the world that punctuate the natural nexus between mental health professionals and campus police. Nevertheless, the research shows that transdisciplinary connections and communications between professionals responding to emergency situations are poor (Burley, 2002; Kate et al., 1997; Tanielian et al., 2000; Yaffe et al., 2005). To quote a line from the classic Paul Newman movie, *Cool Hand Luke*, “What we have here is a failure to communicate.” Discrete entities acting on their own harm efficacy. Trust, respect, and an understanding of each other’s skill and knowledge characterize transdisciplinary interactions.

An interdisciplinary, cooperative effort between mental health and campus public safety could illuminate threats that might otherwise be missed by the assessment of a single organization or decision maker. The objectives here are preempting and preparing for PTSD campus wide (e.g. active shooter scenario training). Three relevant antiterrorism factors can be instructive in crafting PTSD-sensitive exercises (Powell & Rosner, 2005; Su et al., 2010; Wickrama & Wickrama, 2011). From a threat assessment perspective, the first facilitating factor is a change to a military-oriented campus approach akin to preparing for battle. The PTSD response must be tailored to the unique cultural makeup of each campus (Dyb, Jensen, & Nygaard, 2011; Hinton & Lewis-Fernandez, 2011; Little & Akin-Little, 2011).

The second facilitating factor, although a challenge, is building a PTSD-sensitive communications hub for campus police. A best practice would be to use pre-existing communication links through organizations like the Wellness Center, Red Cross, Counseling Centers, Veteran Centers, local fire departments, Student Service Organizations, Dean’s Offices and International Association of Chiefs of Police.

The third facilitating factor for antiterrorism responses requires more expertise with PTSD intervention research as it pertains to campus life. The interoperability of this facilitating role involves a research
framework, learning and teaching, as well as culturally-responsive engagement (Kelly, 2011).

Implications for Research, Practice, and Training

There is clear and convincing evidence to merit DSM-5 training for campus police officer response to the psychological impact of terrorism. In this case, campus police must operate within a professional framework designed to minimize risks for harm, increase consistency in responses to terrorism, and continually improve response systems that address PTSD. Acts of terror are likely to have an immediate effect on the prevalence and severity of psychological issues. Particularly since there is a pervasive cultural stigma towards mental health problems and the idea of seeking psychological help or treatment in some way might be assuaged by the interventions of campus police. The clinical as well as forensic aspects of PTSD are salient to all public safety professionals and disciplines as they prepare to respond to acts of terrorism (Newman, 2011). From a homeland security-training viewpoint, this article indicated that preventing, limiting, or redressing resource loss due to PTSD may be a key therapeutic means of intervention for campus police.

From an evidence-based perspective, PTSD in the aftermath of disasters or war has been extensively discussed in the literature, and has been featured in many academic, military, and mental health organizations. What has not been examined nearly as much, however, are empirically-assessed outcomes of the many training efforts related to campus police PTSD responses that must span various disciplines (Jobson & Q'Kearney, 2008). This paucity of research attention has also prevented theory development and hypothesis testing of variables that could progressively lead to more rigorous homeland terrorism response training for campus threat assessment. The absence of rigorous research has prevented academic institutions from systematically evaluating comprehensive response strengths and weaknesses, and thus blocking improved campus antiterrorism responses.

This article has attempted to identify the knowledge gap in this particular area of campus police training. It should be noted that although this article advocates campus police to be trained or sensitized to PTSD, it is not suggesting that they forego consideration of working with qualified professionals in managing these complex cases. Much further research will be needed in order to establish threat assessment responses that will meet the broader international homeland security needs, particularly as it relates to antiterrorism efforts that may function as a form of stress inoculation for campus public safety personnel in general.

From a campus police training perspective, curricular changes (e.g., terrorism orientation, antiterrorism seminars for campus police, domestic terrorism for campuses, and radicalization on campuses) should include a more clinically-oriented practicum program in which training would include recognizing, recording, and reporting mental health concerns on campus. For example, a clinically-oriented practicum would have at its root the goal of expanding the number of professionals adequately prepared to contribute at least to the initial risk threat assessment vital to
the practice of campus public safety and subsequent intervention. The practicum would start with a review of the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013). The DSM is a primary clinical reference assessment tool used in the psychodiagnostic process with patients from diverse racial and cultural groups (Johnson, 2005). The DSM includes information and diagnostic criteria needed for campus police to understand the types of psychological injury, including injury from experiencing traumatic events. The diagnosis of PTSD by a qualified mental health professional is shaped by the validity and organization of the criteria in the DSM-5.

Campus police of the 21st century are projected to meet ever changing clinical challenges associated with terrorism. From a practical perspective, “what if” scenarios related to antiterrorism and PTSD can be empirically examined through the use of simulation and modeling technology. The use of existing technology can advance interdisciplinary collaborations between mental health professionals and campus police to reach the elusive, but critical goal of understanding and reducing the psychological impact acts of terrorism. Such preparations could include the campus interface of multiple models, adaptable simulations for diverse institutional settings, as well as projected mental health needs.

References


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