

# Assisting Incarcerated Veterans: Veterans Treatment Court

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## **Abstract**

*The war against terrorism and other regimes has been going on for a long time. Members of the military have fought battles and seen things that the general public will never understand. Members of the military have returned from battle with mental health issues, drug dependency, alcohol dependency, as well as other physical and psychological issues. This paper will look at veterans who have become involved in the criminal justice system for violating local, state, and federal laws. Local criminal justice systems have recognized the sacrifice these veterans have made and they are implementing veterans' treatment courts geared towards providing specific treatment for veterans. Veteran specific dorms have also started to be implemented to assist veterans while they are incarcerated to get them services they need. The surveys conducted during this paper discuss already implemented programs to review if they have been successful.*

## **Introduction**

On September 11, 2001, a terrorist attack on the United States shocked the world. Thousands of lives were lost due to the attacks on the World Trade Center in New York, the Pentagon in Washington D.C., and the plane that crashed in Pennsylvania. The victims of these attacks were citizens, visitors, first responders, and children. In the days following the attacks, then President George Bush sent United States military troops into Afghanistan. This event is not the first incident where members of the military have been sent overseas to combat terrorists and other regimes. There was WWI, WWII, Vietnam War, the Persian Gulf War, as well as others.

As the war against terrorism continues, members of the military return home, after tours overseas. They have to transition back into civilian life, which can cause many challenges. Their civilian life may include spouses, children, as well as other loved ones they have not seen in months or years. Their kids have gotten older, and their spouses may have divorced them while they were deployed. The returning veterans need to find employment or some way to earn a steady income. Some may need to find a place to live.

Many of the returning veterans may suffer from Post-Traumatic Stress Disorder (PTSD), due to the environment they were in while overseas. They may also suffer from a traumatic brain injury (TBI), depression, anxiety, or other physical or psychological injuries or disorders. The things they witness while deployed are not things that the general public sees here in the United States. They are not things that the general public may even understand.

When veterans return they face numerous hurdles and challenges that affect their everyday life, as well as the everyday life of their loved ones and friends. One hurdle they may face is finding resources and assistance to help them transition back to civilian life. Are there resources available? Are the resources adequate? Will the returning veteran utilize the available resources and seek treatment? Without proper resources and care, some veterans turn to alcohol and drugs to cope with their PTSD or other struggles. As a result of their struggles, coupled with the abuse of alcohol and drugs, some veterans became incarcerated in correctional facilities for violating local, state, or federal laws.

Numerous criminal justice systems around the nation have drug courts and mental health courts to assist incarcerated individuals, some of which may be veterans. Areas around the country have noticed the number of veterans becoming entangled in the criminal justice system. As a result, law enforcement has worked with attorneys, magistrates, and other groups and organizations to implement veteran's treatment courts. These courts are specifically geared towards military veterans. They attempt to provide assistance and treatment specific to veterans.

What is veteran's treatment court? What are the benefits of a veteran's treatment court? What can jurisdictions do to assist veterans that are incarcerated and entangled in the criminal justice system? Are veteran's treatment courts successful? These are the questions this study will research and answer.

## **Literature Review**

### ***Veterans' Issues***

Veterans from previous wars, as well as current combat operations, have neurological and psychological injuries that may be related to PTSD and TBIs. Since 2000, more than 347,962 veterans have suffered some form of TBI while on active duty. It should be noted, that not all TBIs are combat related. Recent TBI rates are nearly two times the rates reported for Vietnam era veterans (Baldwin, 2015). For many veterans, the damage resulting from deployment include anxiety, depression, PTSD, substance abuse, TBIs, homelessness, as well as other problems (Ahlin & Douds, 2016).

Recent research has reflected that 43% of active duty military personnel are binge drinkers. Alcohol abuse from 1998-2008 has been documented, with increases from 15% to 20% in heavy drinking and 35% to 47% in binge drinking. Substance abuse and mental health disorders, such as PTSD, may co-occur, with dual diagnosis rates reaching as high as 75% in Vietnam-era veterans (Baldwin, 2015).

Suicide, unemployment, homelessness, and incarceration are other issues veterans face. These issues, as well as PTSD and TBIs, are often connected with each other, but vary by era. It has been estimated that approximately 47,725 veterans are homeless on a single night. Findings reflect that the veteran population may have a higher prevalence of specific issues such as mental health, and substance abuse that have shown to be related to illegal, violent, or hostile behavior. These issues may put veterans at a higher risk for incarceration than the general public (Baldwin, 2015).

### ***Incarcerated Veterans:***

The actual number of veterans in contact with the criminal justice system is unknown. Agencies in the criminal justice system do not normally request information on veteran's status. When it is collected, offenders may be reluctant to report their military or veterans status, fearing the potential loss of benefits (Baldwin, 2015).

The concurrence of the psychological problems and their associated disadvantages place some veterans at risk of becoming incarcerated in local, state and federal facilities. By being incarcerated, veterans become involved in the criminal justice system. Recent estimates reflect veterans comprise an estimated 9% of the inmate population. More than 5000 veterans of recent conflicts are serving time in state and federal prisons (Ahlin & Douds, 2016).

### ***Specialized Courts:***

Traditionally, courts have functioned as neutral adjudicators, focused on deciding factual issues. Over the past two decades, courts have faced a variety of new issues, to include psychological and drug dependency issues. The issues have required courts towards the acknowledgement of the defendant's psychological needs. New courts have been developed to accommodate special needs that may not be appropriately addressed in traditional courts. These courts are called "problem solving courts." Problem-solving courts are specialized courts seeking to address the underlying problems of criminal defendants. These courts take a rehabilitative approach by providing specialized treatment to accommodate the defendant's psychological needs (Frederick, 2014).

The specialized court movement began with the creation of drug treatment courts. The first drug treatment court was created in 1989 in Miami, Florida. When drug treatment courts proved successful, courts began applying the same methods in other types of cases. This resulted in the creation of other specialized problem-solving courts, such as domestic violence courts, homeless courts, mental health courts, child abuse courts, teen courts, and others. By 2012, there were over 3,600 problem-solving courts across the country (Frederick, 2014).

The specialized court movement is predicated on the notions that specialized groups demand particular sets of services or responses that may not be readily accessible. Specialized courts connect offenders to these services. Specialized courts address the legal and extralegal problems of the offender, while still protecting the public. In specialized courts, the court adjusts its actions to aid in the therapeutic process, while still applying the principles of due process. They also need to aim to reintegrate the offender back into the community and make all parties whole by bringing offenders, victims, and community stakeholders together. (Baldwin, 2015).

### ***Veterans Treatment Courts:***

The success of problem-solving or specialized courts has not gone unnoticed. The success has resulted in the creation of the veteran's treatment court. The first veteran's treatment court was founded in 2008 in Buffalo, New York by Judge Robert Russell. Judge Russell came up with the idea after noticing an increased number of veterans

appearing on drug and mental health court dockets when he was a Buffalo City Court judge. Judge Russell recognized that the unique experiences and characteristics of veterans called for a new approach, specifically molded to meet the needs of veterans. When Judge Russell created his veterans court, he created it to “operate under the philosophy that many of the defendants who have run into trouble with the law need treatment, not incarceration” (Frederick, 2014).

In many veteran treatment courts, the court gives the offenders the option to enroll in court supervised treatment in lieu of incarceration. If they do well in the program, they avoid jail or prison, and their records are cleared (Ahlin & Douds, 2016).

Judge Russell derived ten key components modified specifically for veteran’s treatment courts. First, veteran’s treatment courts should integrate mental health services and alcohol and substance abuse treatment with the justice system. Second, veteran’s treatment courts should employ a non-adversarial approach in which the prosecution and defense counsel work together as a team. Third, veteran’s treatment courts should identify eligible participants entering the justice system and place them in the program as soon as possible. Fourth, veteran’s treatment courts should provide access to rehabilitation services, mental health treatment, medical care, education, job training, and/or family counseling. Fifth, abstinence from alcohol and illegal drugs should be continuously monitored through frequent testing. Sixth, veteran’s treatment courts should develop a coordinated strategy that rewards cooperation but appropriately punishes noncompliance with the program requirements. Seventh, the judges must actively supervise and interact with each participant. Eighth, the court should monitor the progress of the program by periodically evaluating the achievements or failures of certain objectives and the effectiveness of various measures taken to accomplish the goals of the program. Ninth, the court’s staff and volunteer mentors should continuously be involved in the training and education. Finally, the court and others involved in the program should strive to maintain partnerships among government agencies, support and treatment centers, and community based programs in order to foster community-wide participation and support of the program (Frederick, 2014).

### ***Veterans Court Eligibility:***

Most veteran’s treatment courts accept veterans of all service eras and military branches (Frederick, 2014). It appears that the primary considerations for eligibility are not the therapeutic needs of the veterans, but are often the veterans’ status and charge types. Most courts also limit participation to veterans who have received an honorable discharge. This requirement is related to Veterans Affairs eligibility and not actual needs for services (Baldwin, 2015).

Eligibility requirements are also based on the nature of the veteran’s crime. The nature of the crime may be determined by its classification of a misdemeanor or felony according to state statutes. The level of violence involved also plays a role. This varies and is dependent on the particular court (Frederick, 2014).

## **Veterans Court A Success**

Veterans courts vary as to the general procedure of the program, but most, if not all, courts require that the veteran's participation in the program be voluntary. Once the defendant is accepted into the program, the process resembles that of a drug court or mental health court. The general model requires regular appearances in court, mandatory treatment sessions, and frequent random drug and alcohol testing. The one element that differentiates Veterans treatment courts from other problem-solving courts is the incorporation of a mentoring program. Each veteran is paired with a mentor who provides the veteran with support and motivation throughout the process. The mentors are usually volunteers and are usually veterans themselves (Frederick, 2014).

By the end of 2008, less than one year after the first Veterans treatment court was opened, the Buffalo court had three graduates and seventy-five veterans still participating in the program. In the summer of 2009, the Buffalo court cited a 0% recidivism rate for the graduates of the program. The most recent statistics relating to the impact of this movement were set out in a February 2013 report by the U.S. Department of Veterans Affairs. This report indicated that as of December 31, 2012 there were 168 formal veteran's treatment courts. The report also revealed that nationwide, 7,724 veterans have participated in veteran's treatment court programs since the inception of such courts. On average there were twenty-four veterans per court. The average length of participation was fifteen months for misdemeanor offenses and eighteen months for felony offenses (Frederic, 2014).

Although the recent establishment of veterans treatment courts at the time, limited the amount of available data, studies reveal early indications of success, such as reduction in the recidivism rate, a positive impact on the individual lives of the participants, benefits to society as a whole, and reduced incarceration costs (Frederick, 2014).

One important indication of success is the reduction of recidivism rates in VTC participants. From 2004-2006, only one of thirty-four graduates of the Anchorage Alaska veterans treatment court program was rearrested within two years of graduation. Only two of more than one hundred graduates of the Buffalo veteran's treatment court were rearrested within one year of graduation. A 2011 study of program graduates from eleven of the fourteen veterans treatment courts showed less than a 2% recidivism rate, as compared to the almost 70% recidivism rate for state prisoners (Frederick, 2014).

The positive effects of the veteran's treatment court program extend beyond the reduction in recidivism rates. The experience creates a positive impact on the lives of the participants. Many veterans who successfully complete the program have experienced positive effects in their family lives by mending their relationships with their spouses and children. Furthermore, some graduates have taken advantage of the program requirements, such as community service, and turned them into permanent employment. Evidence suggests that the program graduates have their lives on track, a changed attitude, and a new perspective on life (Frederick, 2014).

### ***Veterans Specific Housing Areas in Correctional Facilities:***

Some facilities take it a step further and create veterans specific housing areas within their correctional facilities. As stated earlier, recent estimates reflect veterans comprise an estimated 9% of the inmate population

California, Texas and Florida lead the country in military veteran populations, ranging from 1.5 to 1.8 million veterans per state. Military service by no means excuses any crimes committed by veterans, but it has inspired many facilities across the country to extend a helping hand to those who are used to wearing a different kind of uniform. In 2012, Captain Malik Muhammad and the Orange County Corrections Department fulfilled their vision and created a specialized dormitory for qualified veteran inmates. The walls are decorated with military insignia to create an atmosphere different from the traditional correctional dormitory. Officers and supervisors who work the dormitory are also current or former members of the military, which creates better communication between correctional officers and the inmates (Lawson, 2015).

The veteran's dorm serves as an alternative for inmates suffering from PTSD, substance dependency and homelessness, as well as those who require assistance from the U.S. Department of Veterans Affairs. The program provides inmates with outlets to address their addictions through individual and group counseling, including life skills classes, substance abuse education, as well as other classes. The Orange County Department of corrections has also implemented a veteran's court to supplement their veteran's dorm (Lawson, Lin, Julie, & Holt, 2015).

In 2015, the Connecticut Department of Corrections opened its first Veteran Service Units (VSUs) at the Willard-Cybulski Correctional Institution to reduce recidivism and save taxpayer dollars while reducing crime. The VSU was created in consultation with the Veterans Affairs (VA) Connecticut healthcare system, the Connecticut Department of Labor, and other veteran organizations. On the VSU, reentry counseling, vocational training, life-skills training, substance abuse and mental health treatment, peer support, and other services are offered. Roughly 60% percent of the veterans on the VSU are not eligible for VA care due to reasons such as dishonorable or bad conduct discharge or insufficient service time. The VA staff work with all veterans on the SVU to determine eligibility and connect them to services for which they are eligible, including medical and mental healthcare, and vocational and housing services (Tsai & Goggin, 2017).

The Connecticut VSU seeks to embody a military culture of discipline, pride, and respect. There are patriotically themed murals on the walls and military formation practices to commemorate holiday and memorial events. The setting simulates a military style boot camp. Everyone wakes up at the same time, everyone participates in a unit-wide morning meeting, and eats meals together. Veterans are offered opportunities to take classes in English, business administration, medical records, and other skill-based programs (Tsai & Goggin, 2017).

In 2018, the Allegheny County Jail opened a veteran's pod that houses 34 veterans. The pod was opened in order to give veterans access to additional services and programming and to foster camaraderie and respect among inmates. The pod is also intended to complement the county's veteran's court that began in 2009 and focuses on rehabilitation over punishment. It appears that the main difference between the veterans pod and general pods is the demeanor of the inmates and the staff (Bradbury, 2018).

In the Douglas County Jail in Nebraska bugle music rouses a group of 25-30 men each morning. After they are awoken they are escorted to a small gym and one of the men leads a brief but rigorous series of exercises, or P.T. in military parlance. Upon completion they assemble in their eating area, arrange themselves to face the flag and recite the Pledge of Allegiance. Qualifying veterans are given the option of being placed in the unit, separate from the inmate population (Burbach, 2016).

## **Methods**

The purpose of this research paper was to determine the success, or lack of success, of Veteran's treatment courts and the implementation of Veteran's specific dorms in correctional facilities.

Information was gathered through questionnaires given to specific members of agencies from around the United States who have Veteran's treatment courts, Veteran's specific dorms, or both. The surveys were sent via email to points of contact of participating agencies. The participating agencies were:

- Collier County Sheriff's Office (Naples, FL),
- Collin County Sheriff's Office (McKinney, TX)
- Delaware Department of Corrections (Delaware)
- Hernando County Sheriff's Office (Brooksville, FL)
- Kankakee County (Kankakee, IL)
- Las Vegas Metropolitan Police Department (Las Vegas, NV)
- Lee County Sheriff's Office (Fort Myers, FL)
- Maricopa County Sheriff's Office (Phoenix, AZ)
- Miami-Dade (Miami, FL)
- Osceola County Corrections Department (Kissimmee, FL)
- Pinal County Sheriff's Office (Florence, AZ)
- Tarrant County Sheriff's Office (Ft. Worth, Texas)
- Woodbury County (Sioux City, IA)

Information was gathered relating to how long the agencies have had veterans treatment courts and what the recidivism rates were for the participants. Other information gathered was the age of participants and any mental health or dependency issues participants may have. Also discussed was how participants qualified for the program and if it was voluntary or court ordered.

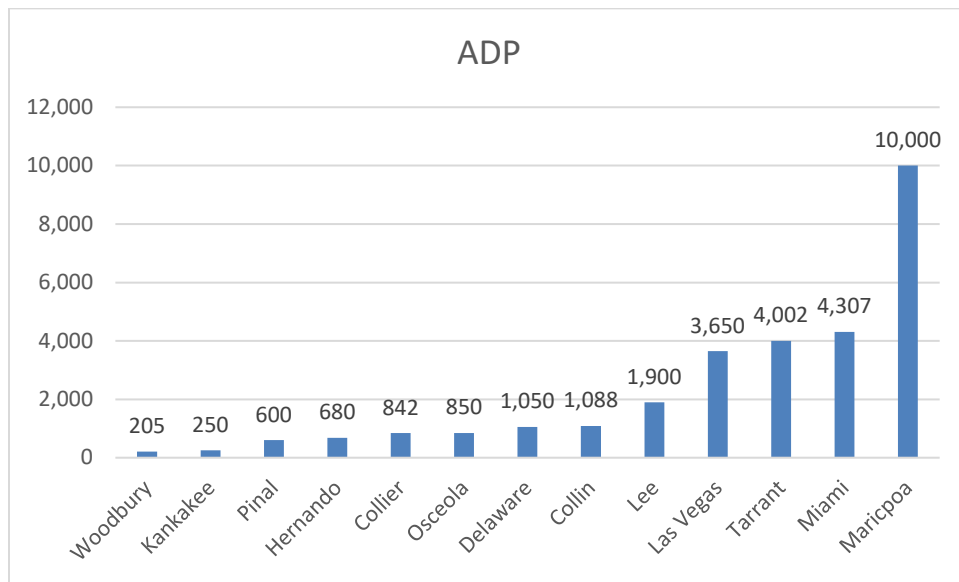
The main weakness pertaining to this survey was that only a small sample of veterans treatment courts were asked to participate. Some of the agencies asked to participate were agencies similar to the agency I work for, as well as others that were substantially larger. According to the United States Department of Veterans Affairs, as of June 30, 2016, there were 461 Veterans treatment courts throughout the United States. One weakness that wasn't considered at the inception of this paper, but was determined during the survey, was the fact that the programs are normally overseen by the court system, with limited participation from the local correctional facility, when the veterans are

incarcerated. Another weakness was that some of the data was provided in bulk when asked to be broken down during certain timeframes.

## Results

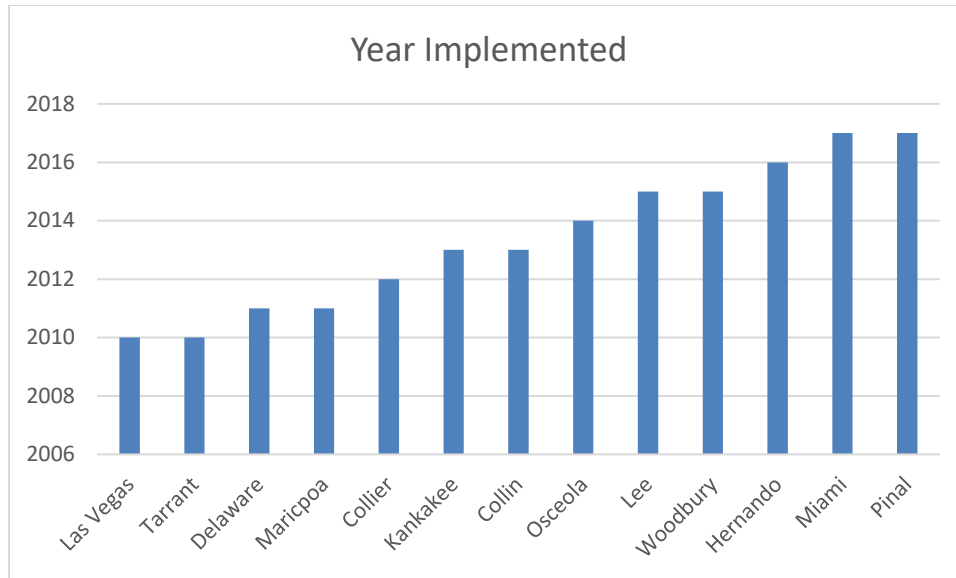
I sent out a total of 17 questionnaires, of which 13 were returned. Of the 13 returned, two provided minimal information as their program is handled by the courts. This is a 76.4 percent return rate. Upon reviewing the responses, some of the respondents chose to skip some of the questions, or were unable to answer them.

The first two questions asked what law enforcement agency or government entity the respondent worked for, as well as their inmate population. Twelve of the respondents worked for local county or city jurisdictions, while one was a state Department of Corrections (Delaware). Nine of the respondents had a jail population of less than 2000 inmates. Las Vegas had a jail population between 2001 – 4000 inmates, Miami-Dade and Tarrant County had an inmate population between 4001 – 6000. Maricopa County had an inmate population of 10000 (see chart below).



Question three asked how long each respondent has been involved with a veteran's treatment court. Las Vegas and Tarrant County started veteran's court in 2010. Delaware and Maricopa County started their veteran's treatment court in 2011, with Collier County starting in 2012, Kankakee County and Collin County in 2013, Osceola County in 2014, Lee County and Woodbury in 2015, Hernando in 2016, and Miami-Dade and Pinal Counties in 2017 (see chart below).





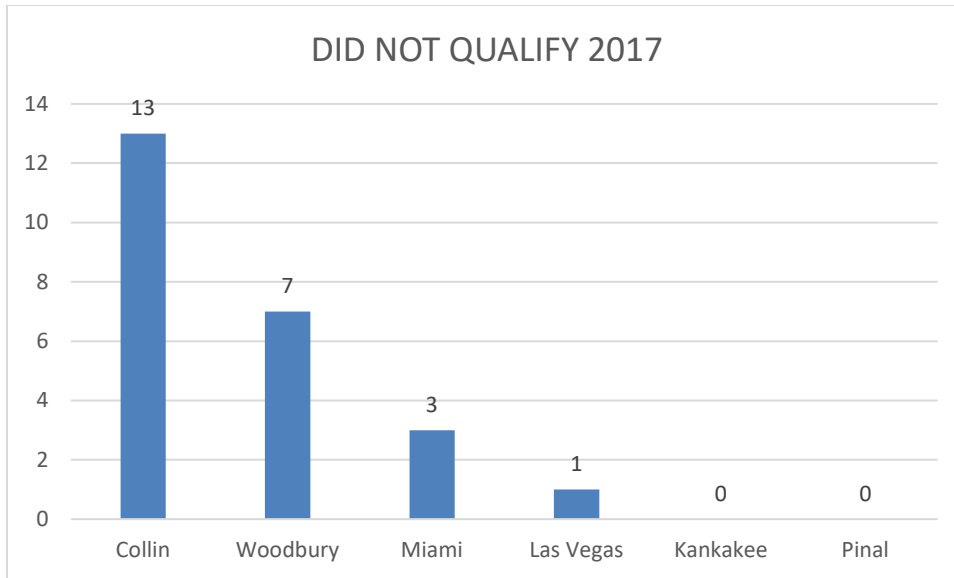
Question four asked if veteran’s treatment court was court mandated or voluntary for veterans. For qualifying veterans, 100% of the programs were voluntary, meaning that participants volunteered to enter the program, and were not forced into it.

Question five of the survey asked how many veterans that qualified had decided not to participate in the program. Several of the respondents did not track this data. Of the responses received, Pinal County notated 2, Miami-Dade notated 4, Collier County notated 5, Collin County notated 20, and Tarrant County notated 146 (since 2010).

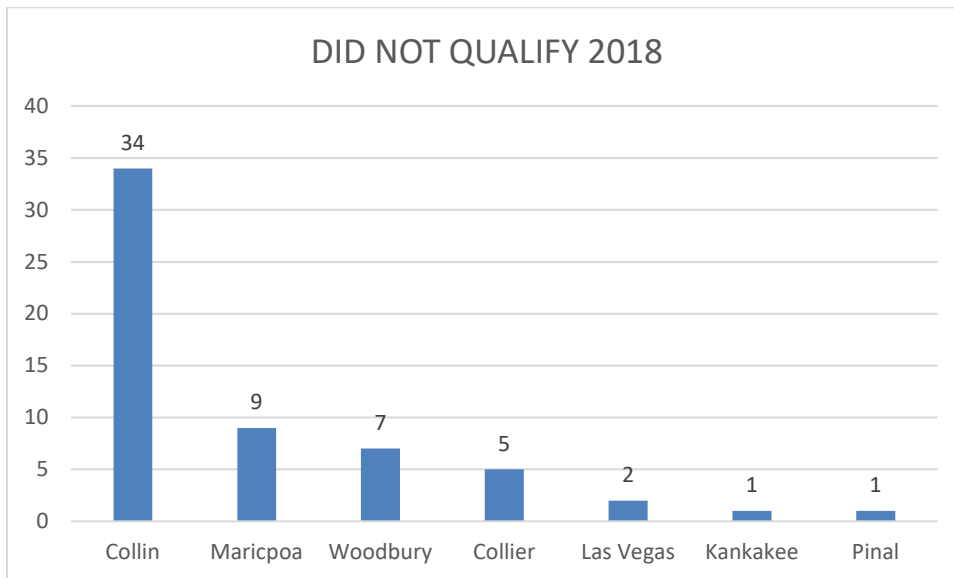
Question six asked what qualified and/or disqualified veterans from participating in the program. One respondent did not answer this question. The remaining twelve respondents all had qualifications requiring the participant to be currently or previously serving in the United States military and be honorably discharged or a general discharge. Several of the respondents required participants to be 18 years of age and residents of the county in which they were arrested. Several of the respondents also required the veteran to have drug or alcohol dependence or mental health issues with treatable needs.

The disqualifiers were similar between all respondents as well. Veterans that volunteered to participate were disqualified if they were dishonorably discharged from the military. Other disqualifiers were the type of charges they were facing or previous convictions. Sex crimes and crimes against children were disqualifiers for all of the respondents. Some other common disqualifiers amongst the respondents were major felony offenses to include crimes of violence or drug trafficking charges.

Question seven pertained to veterans that did not qualify for veteran’s treatment court in the years 2017 and 2018. Seven of the agencies did not have data for 2017. Of the six respondents, Kankakee and Pinal Counties had 0, Las Vegas had 1, Miami-Dade had 3, Woodbury County had 7, and Collin County had 13 that did not qualify during 2017. This resulted in a total of 24 veterans between the six respondents that did not qualify for the program in 2017(see chart below).

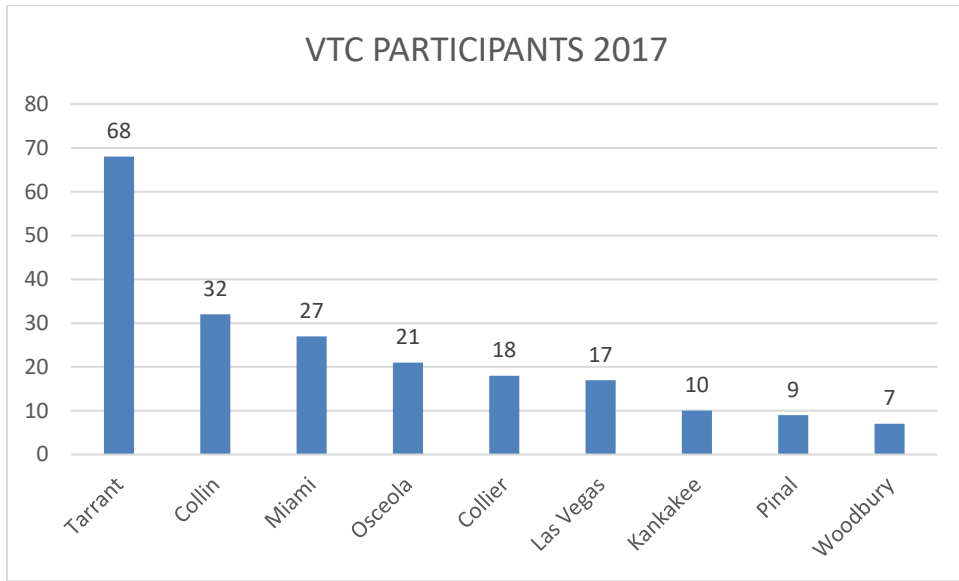


Six of the respondents did not have data for 2018, reflecting how many veterans did not qualify. Of the seven responses Kankakee and Pinal Counties had 1, Las Vegas had 2, Collier County had 5, Woodbury County had 7, Maricopa County had 9, and Collin County had 34 that did not qualify during 2018. This resulted in a total of 59 veterans, between the seven respondents, that did not qualify for the program in 2018 (see chart below).

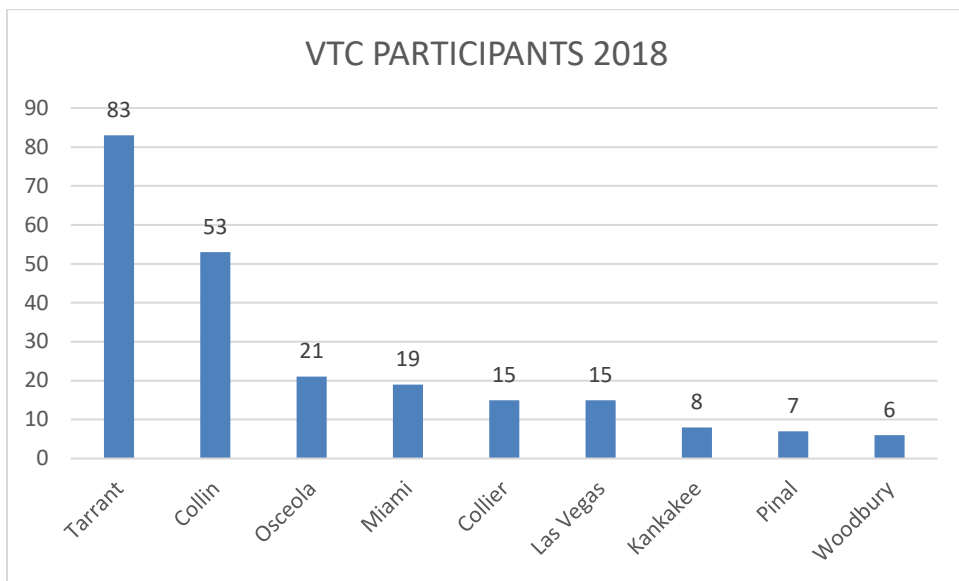


Question eight pertained to how many veterans treatment court participants each agency had for the years of 2017 and 2018. Four respondents did not answer this question. Of the remaining nine respondents, Woodbury County had 7, Pinal County had 9, Kankakee County had 10, Las Vegas had 17, Collier County had 18, Osceola had 21,

Miami-Dade had 27, Collin County had 32, and Tarrant County had 68 participants in 2017. This resulted in a total of 209 participants between the nine respondents for 2017 (see chart below).

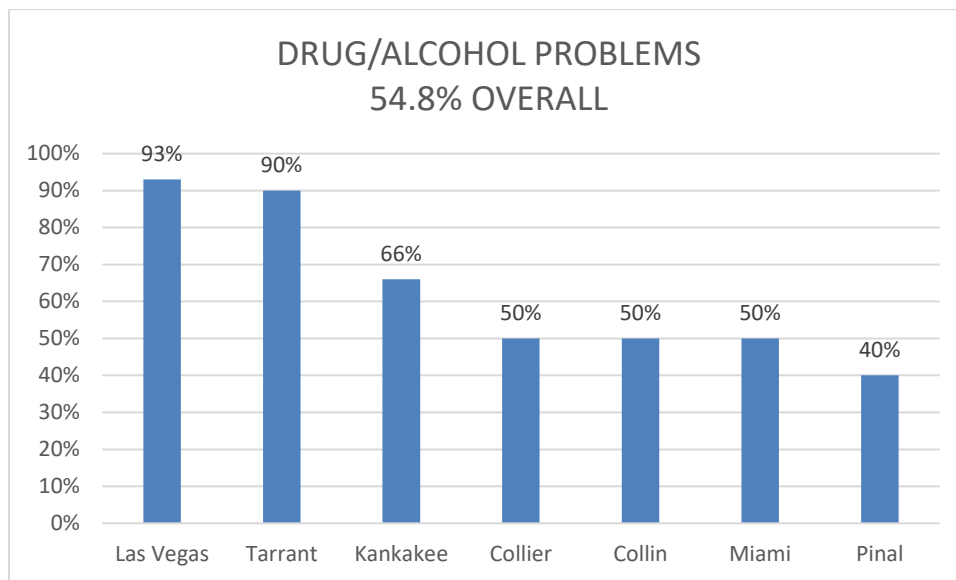


Four respondents did not answer question eight in reference to the year 2018. Of the nine respondents, Woodbury had 6, Pinal County had 7, Kankakee County had 8, Collier County and Las Vegas had 15, Miami-Dade had 19, Osceola County had 21, Collin County had 53, and Tarrant County had 86 participants in 2018. This resulted in a total of 227 participants between the nine respondents for 2018 (see chart below).

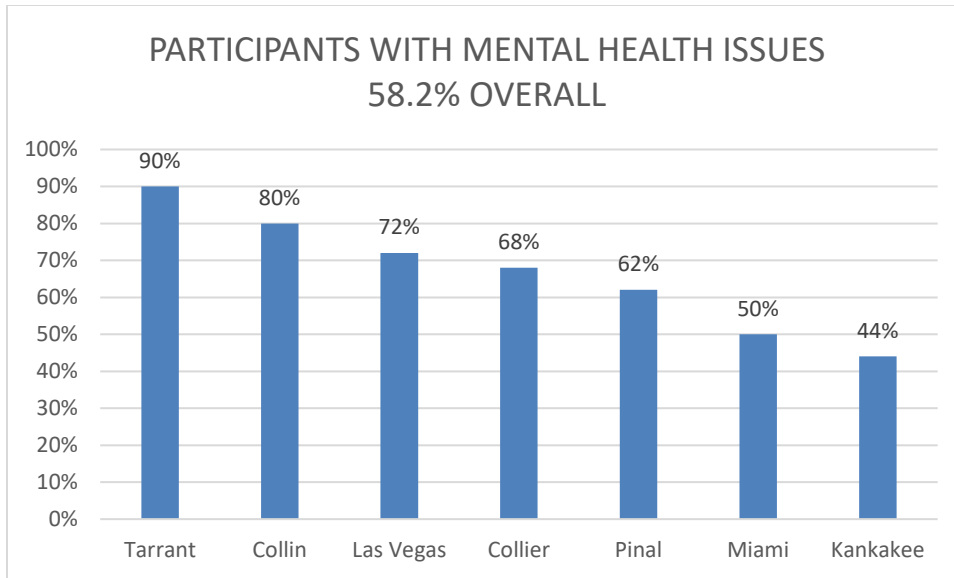


Question nine asked about participants' age range, sex, and race of participants. Six respondents did not answer the question, or were unable to provide requested data. Of the remaining seven respondents, their participants were of all ages and ethnicities. The majority of participants were Caucasian males between the ages of 20 – 40 years of age, followed by black males within the same age group. Several of the respondents had Caucasian females as participants, but the average was approximately 2. The data provided varied making it hard to break it down any further.

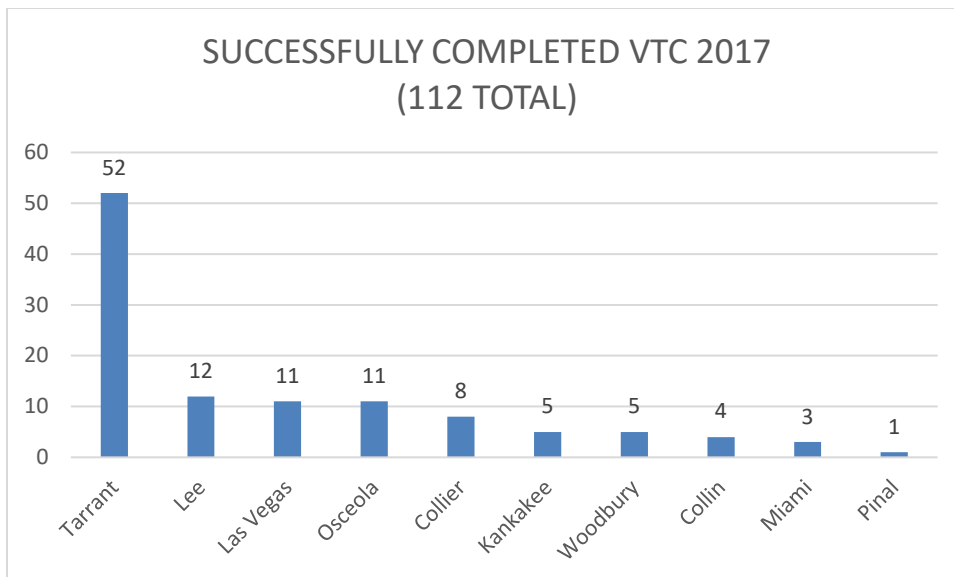
Question 10 asked about drug and alcohol dependency of the participants. Six of the respondents did not answer this question or did not have the requested data. Of the seven respondents, Pinal County had 40%. Miami-Dade, Collier County and Collin County had 50%, while Kankakee County had 66%, Tarrant County had 90%, and Las Vegas had 93%. Based on the seven respondents an average of 54.8% of the overall participants suffered from drug or alcohol dependency.



Question 11 asked about mental health issues of the participants. Six of the respondents did not answer this question or did not have the requested data. Of the seven respondents, Kankakee County had 44%, Miami-Dade had 50%, Pinal County had 62%, Collier County had 68%, Las Vegas had 72%, Collin County had 80%, and Tarrant County had 90%. Based on the seven respondents, an average of 58.2% of the overall participants suffered from mental health issues. (See data specific chart below).

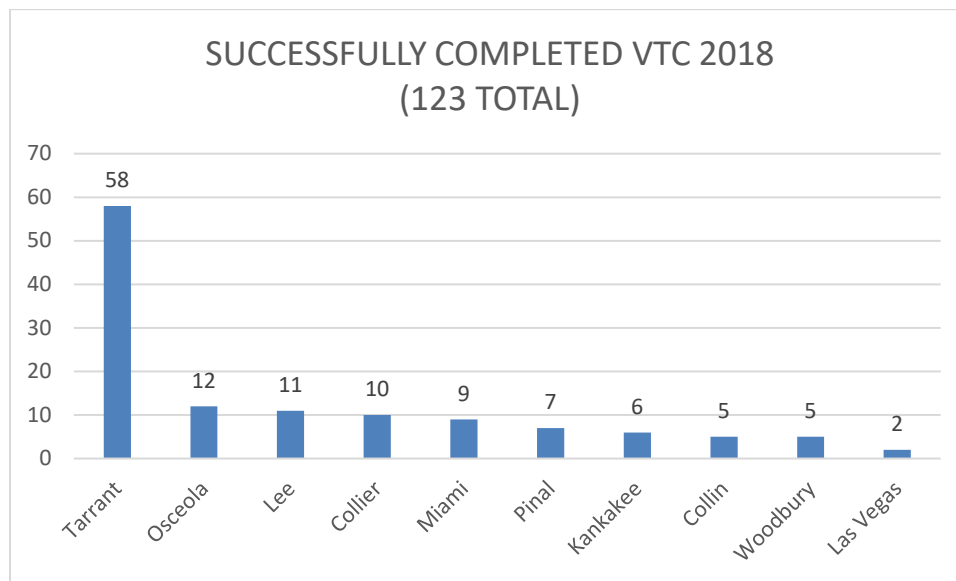


Question 12 asked how many participants successfully completed the veteran’s treatment program in 2017 and 2018. Three respondents did not answer the question or did not have the requested data for 2017. Of the ten respondents, Pinal County had 1, Miami-Dade had 3, Collin County had 4, Woodbury County had 5, Kankakee County had 8, Osceola County and Las Vegas had 11, one Lee County 12, and Tarrant County had 52 in 2017. This resulted in a total of 112 participants completing the veteran’s treatment court in 2017 (see chart below).



Three respondents did not answer the question or did not have the requested data for 2018. Of the ten respondents Las Vegas had 2, Woodbury and Collin Counties had 5, Kankakee County had 6, Pinal County had 7, Miami-Dade had 9, Collier County had 10,

Lee County had 11, Osceola County had 12, and Tarrant County had 58 in 2018. This resulted in a total of 123 participants completing the veteran’s treatment court in 2018 (see chart below).



Question 13 asked for the number of participants that have been arrested since completion of the veteran’s treatment court. Six respondents did not answer the question or did not have the requested data. Responses differed between the remaining six respondents and I was unable to get accurate numbers. Collier County stated 17%, Kankakee County had 18%, Las Vegas and Pinal County had 0%, Collin County had 2 subjects, Osceola County had 3 subjects and Tarrant County had 18 subjects (since inception).

Question 14 - 18 of the survey switched from veterans treatment court to veteran specific dorms within correctional facilities. Veteran specific dorms are starting to form around the nation.

Question 14 asked the respondents if they have a veteran specific dorm in their correctional facility. Of the thirteen respondents, only 6 have veteran specific dorms within their correctional facility. The respondents that have veteran specific dorms are Delaware DOC, Las Vegas, Maricopa County, Collin County, Osceola County, and Pinal County. Of the 6 respondents, Las Vegas and Osceola County implemented their veteran’s dorm within the past 18 months.

Question 15 asked about the qualifiers and disqualifier for veterans to be housed in veteran specific dorms. Of the 6 respondents, all of them require them to be a veteran with honorable or general discharge from the United States military, or be an active duty member. They also have them vetted through veteran’s affairs for approval. The disqualifiers all seem similar in nature as they do not allow veterans with sex offenses of violent crimes against children. The majority of the respondents do not allow certain felony offenses to participate in the veteran’s dorm, and some are on a case by case basis.

Question 16 asks about special programs or services offered to the residents of the veteran dorms. All of the respondents provide services through veteran's affairs. Other services that were common among the respondents were yoga, relaxation, meditation, one on one therapy, group therapy, and conflict resolution.

Question 17 asked if the incidents in the veteran specific dorms were lower or higher when compared to general population dorms. Incidents pertain to fights, disruptive inmates, disturbances, and uses of force. All of the respondents stated that the incidents were lower in the veteran specific dorms. Two respondents stated that they have not had any incidents in their veteran dorm.

Question 18 asks if the respondents have any data showing success of the veteran specific dorms. One respondent noted a reduction of recidivism to 62%, while another respondent noted that they have had success in finding homes and jobs for the veterans. The other respondents either had no data or the short span of the program has not been long enough to get accurate data yet.

Question 19 was a question asking if the respondent has anything they wanted to provide in reference to the veterans treatment court or veteran specific dorm that was not covered in the previous questions. One respondent stated that aspect that has proven to be very important in the veteran's treatment court and dorm is a mentor program. The mentors guide the veterans and are a support mechanism for them. They keep the participants on track and motivated for success.

## **Discussion**

The results of the survey are interesting and supportive of veteran's treatment courts and veteran specific dorms in correctional facilities. Veterans treatment courts have been around since 2008, making them somewhat of a new system. They are modeled after already existing drug treatment and mental health courts. The current mental health issues and number of veterans being involved in combat returning to civilian life have brought mental health and veterans to the forefront of discussion.

The 13 respondents of the survey have had veteran's treatment courts since 2010, with half of them starting in 2013 or later, showing the numbers of programs continuing to grow. Veteran's specific dorms in correctional facilities are an even newer topic, as they didn't originate until after the start of veterans treatment courts.

The veteran's treatment courts continue to grow, as is reflected in the survey. In the responses there were 209 participants in 2017, which increased to 227 in 2018. More alarming though is that in 2017, 24 veterans did not qualify for veteran's treatment court for varying reasons, and that number more than doubled to 59 in 2018. The varying reasons for the number of veterans not qualifying could be positive, if they didn't qualify because they didn't have a drug or alcohol dependency or a mental health issue that was diagnosed and treatable, but that is highly unlikely. Based on the responses, 54-58% of the overall participants in the respondents programs suffered from a drug or alcohol dependency or mental health issue that needed treating.

All of the respondents had the same basic requirements for participants. In order to participate in the veteran's treatment courts, participants must be veterans of the United States Military or currently serving on active or reserve duty. Most of the respondents

required participants to be a resident of their county or jurisdiction. This makes sense due to the treatment services and monitoring required once they are released from jail and participating in the program. Most services, as well as required meetings and weekly reporting requirements are provided within the jurisdiction of the county court.

The disqualifiers were similar between all respondents. Disqualifiers were similar between all respondents. Veterans were disqualified if they were dishonorably discharged from the military. They were also disqualified based on current charges and past convictions involving sex crimes, crimes against children, violent felony offenses, and drug trafficking charges. This was evident for both the veteran's treatment courts and the veteran specific dorms. Convictions for these disqualifying offenses will most likely result in prison sentences.

One of the better ways to measure the success or failure of a veteran's treatment court is the recidivism rate. Based on the responses received, the recidivism rate for veterans in veteran's treatment courts appear lower than that of the general public. This reflects that the veteran's courts have proven successful.

Success of veteran specific dorms in correctional facilities can be measured by the number of incidents they have, such as fights, disruptive inmates, and uses of force. All of the respondents noted a lower incident rate, if any, when compared to general population dorms. This reflects that the veteran specific dorms are successful.

## **Recommendations**

The survey results indicate that more and more veterans are participating in the veteran's treatment court. This does not necessarily mean that more veterans are being arrested. It reflects that the courts are taking a more active role in trying to help veterans and get them the services and the help they need to deal with drug and alcohol dependency, as well as mental health issues. More and more veteran's treatment courts are being implemented on a yearly basis in different jurisdictions. The state of Florida has a Florida State Statute (FSS 394.47891), giving the chief judge of each judicial circuit the authority to establish a veterans treatment court. With the state of Florida allowing the creation of veteran's treatment court, as well as the success of current veteran's treatment courts, I recommend that more jurisdictions review statistical data to determine if there is a need for a program within their jurisdiction.

Due to the success of veteran's treatment courts, the programs need to continue to grow and progress, as other treatment courts have done over the years. Drug and alcohol dependency are not new, and neither are mental health issues. They appear to be recognized and diagnosed more now than in the past.

Veteran specific dorms are a new concept that are being implemented as a counterpart to the veteran's treatment court. If jail populations and facility layout allow for an agency to implement a veteran specific dorm it could be very beneficial. It appears that the veteran specific dorms when operated effectively reinstate the military culture and things function appropriately by providing services to the veterans.

Veterans are a unique culture due to the environment they were in while overseas. The things they witness while deployed are not things that the general public sees here in the United States. They are not things that the general public may even understand.



Due to this realization, the implementation of veteran's treatment courts and veteran specific dorms in correctional facilities should have a positive influence and outcome for the country's veterans, and society.

Keith Harmon is Captain of the Corrections Division with the Collier County Sheriff's Office, overseeing both the Naples and Immokalee Jail Centers. He joined the Collier County Sheriff's in 2000 as a Corrections Deputy. In 2004, he was promoted to the rank of Sergeant, where he oversaw housing and admissions and release. In 2008, he was assigned to implement the 287g Criminal Alien Task force in the jail division. In mid-2008 he was promoted to the rank of Lieutenant. During his tenure as a Lieutenant he oversaw numerous entities to include housing, admissions and release, Criminal Alien Task Force, transportation, and jail investigations. In 2018 he was promoted to the rank of Captain. He earned a Bachelor's degree in Public Safety management from Edison State College and a Master's Degree in Administration from Barry University. He is a Certified Jail Manager through the American Jail Association, as well as a Certified Public Manager through the Florida Center for Public Management at the Florida State University. He is also a graduate of the National Jail Leadership Academy.

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## Appendix A

Introduction: My name is Keith Harmon. I am the Captain of the Corrections Division at the Collier County Sheriff's Office in Naples, Florida. I am currently enrolled in the Florida Department of Law Enforcement Senior Leadership Program. As part of the program, I am required to do a research paper, including a survey. The topic I chose was Veterans Courts, with a possibility of including veteran specific housing areas/dorms in a correctional facility. I reached out via the NJLCA list serve, as I am a graduate of Class 8. I received a response from you stating you had a Veterans court and/or veterans dorm. It has come to the point in the program where I have to conduct my questionnaire. I would extremely appreciate if you could complete the attached questionnaire and return it to me by June 5, 2019. I know everyone is extremely busy, but this is an area where sharing your expertise or experience(s) could be very beneficial to the field of corrections. Any assistance you could provide would be greatly appreciated. Thank you in advance. If you have any questions, please do not hesitate to call me or email me

### Questionnaire

#### VETERANS TREATMENT COURTS

1. What law enforcement/corrections agency or government entity do you work for?
2. Jail Population?
3. How long have you had a Veterans treatment court?
4. Is Veterans court voluntary?
5. Do you have statistical data showing how many Veterans decided against doing the Veterans treatment court, if it was voluntary?
6. What are the qualifiers/disqualifiers for Veterans treatment court participants?
7. How many veterans did not qualify for veterans court in 2017 and 2018, and why (I am looking for 2 years of data separated by year for comparison)?
8. How many Veterans treatment court participants did you have in years 2017 and 2018?
9. What were the age ranges, sex, and race of your veteran's court participants during the requested time frames?

10. How many of the Veterans court participants have drug/alcohol dependency problems?
11. How many of the Veterans court participants have mental health issues?
12. How many Veterans treatment court participants completed the program successfully in 2017 and 2018?
13. How many Veterans treatment court participants have been arrested since completion of Veterans treatment court (recidivism rate)?

#### VETERANS DORMS/HOUSING AREAS

14. Do you have a Veterans specific dorm in your correctional facility? If so, how long have you had a Veterans specific dorm?
15. What are the qualifiers/disqualifiers for Veterans specific housing area in your jail/correctional facility?
16. Do you have any special activities/services that your agency conducts in the Veterans dorm for the veterans?
17. Are incidents in your Veterans specific housing area higher or lower compared to other general housing areas?
18. Do you have any data showing that a Veterans specific dorm has been successful in providing services to veterans? Why or why not?
19. Is there anything I did not ask that you may want to provide that you believe is important pursuant to veterans treatment courts and veterans specific dorms?