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Advancing the Line: Increasing Empirical Literature on Justice-Involved Veterans

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Abstract

American veterans have long struggled with the aftereffects of combat exposure, repeated deployments to hostile countries, and extended time spent away from their families and loved ones. Historically, when veterans struggling with issues such as mental illness and substance abuse, which can be related back to their military service, came into contact with the criminal justice system, they were processed without regard to their unique military experience. Beginning in 2008, however, a new type of problem-solving court, veterans' treatment courts (VTCs), have been increasingly adopted to target justice-involved veterans to address the distinct issues and challenges they face. VTCs are modeled after the successful drug and mental health court models and, as such, utilize therapeutic jurisprudence and effective intervention. However, they have not been subjected to the same amount of scholarly attention the aforementioned courts themselves have. This editorial introduction briefly reviews past and current research on justice-involved veterans and calls for the continued empirical assessment of VTCs to better understand both their impact and the military population they serve.

Keywords

veterans' treatment courts, justice-involved veterans, problem-solving courts

American soldiers who have been involved in, and exposed to, combat and wartime deployments have dealt with chronic psychological problems stemming from their experiences. The first mention of such symptoms, which include mental fatigue,

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emotional distress, flashbacks, and hypervigilance, came after the Civil War when Dr. Mendez DaCosta labeled such emotional responses to combat as soldier's heart, a cardiovascular response to combat which was assumed to be a temporary affliction (McDermott, 2012). Since then, there have been numerous names that have been used to describe what we now know as posttraumatic stress disorder (PTSD), such as shell shock, combat fatigue, and post-Vietnam syndrome. It is estimated that, as a result of the most recent wars fought by American forces in the Middle East, 300,000 servicemen and women are experiencing symptoms of PTSD (Hawkins, 2010) with less than half of these soldiers seeking treatment for their afflictions (Holbrook, 2010). As a result, many veterans experiencing PTSD and Traumatic Brain Injury (TBI) have developed substance abuse issues in an attempt to self-medicate, resulting in increased contact with the criminal justice system (Brummet, 2013). The increased justice system contact has resulted in an estimated 8% of all individuals incarcerated within the United States being a veteran (Bronson, Carson, Noonan, & Berzofsky, 2015). In addition, a longitudinal study of veterans who served in Iraq and Afghanistan found that 27% to 35% reported symptoms of PTSD, depression, alcohol misuse, suicidal ideation, and self-reported aggression (Pinals, 2010). Although issues associated with wartime military involvement are not new (see Wilson & Zigelbaum, 1983) and participants within various veterans' treatment courts (VTCs) are from numerous service periods, the number of veterans coming into contact with the justice system after serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND) have not gone unnoticed, and VTCs were created as a result.

The first VTC was established in Buffalo, New York, by the Honorable Judge Robert T. Russell in 2008. VTCs mirror both drug and mental health court models in deliverance of therapeutic jurisprudence and effective intervention. However, although drug and mental health courts address the needs of offenders experiencing substance abuse issues and mental illness, respectively, they are not equipped to deal with the unique issues that veterans and their families experience, such as prolonged deployments away from home, often in hostile environments, and stressors relating to combat and other service requirements. These experiences can lead to a number of negative outcomes for veterans, such as alcohol and substance abuse issues, homelessness (an estimated 23% of the homeless population are veterans), strained relationships, and unemployment (Russell, 2009). Given the nature of these issues, coupled with the distinct culture of military service involvement, it is not only necessary that VTCs be established but also imperative that they be studied to assess their impact on the veterans participating within them.

Although VTCs have been a part of the judicial landscape since 2008, there has been a dearth of empirical assessment given their relative newness. The first national examination of VTCs was conducted by Baldwin in 2013. Her study identified 114 VTCs in operation within the United States and provided information on 79 of these courts. Important findings included the need for better program recruitment and retention (one in five eligible veterans opt out or drop out of the program), participant background and demographic information, a high frequency of drug-related offenses

being reported to the courts, the presence of mental health and family challenges, and the difficulty of identifying veterans entering the justice system. Since Baldwin's work, there has been a slight increase in scholarly activity aimed at better understanding the VTC court work group, incarcerated veterans, and court effectiveness.

Lucas and Hanrahan (2016) conducted interviews with the court work group of a well-established VTC located in a Northeastern state. Pre-court meetings and courtroom proceedings were also observed to determine similarities between the selected VTC and the traditional drug court model. The use of therapeutic jurisprudence and effective intervention, essential to the drug court model, was found to be present. Major struggles of the court were identified as the difficulty of measuring court success, identifying justice-involved veterans, and the recruitment and retention of peer mentors. More direct-impact evaluations, such as the one conducted by Slattery, Dugger, Lamb, and Williams (2013), found that, for the 83 VTC participants within their study, zero graduates of the court had recidivated 1 year post-graduation. Although these results are promising, fewer than 10 of the court participants graduated during the study period, leading the authors to caution the interpretation of claiming VTCs a success. Attempting to address the shortcomings of previous research, Hartley and Baldwin (2016) compared graduates of a large urban VTC to probationers who were offered court services but declined, accepting traditional court sanctioning resulting in terms of probation. Results indicated that the VTC was successful at reducing recidivism for program graduates up to 36 months after entry into the program. Previous research, although not without its limitation, shows promise for the VTC model in similar light to its drug and mental health court counterparts. However, much more conclusive research is needed before success can be determined. Research presented in this special issue of *Criminal Justice Policy Review (CJPR)* continues to build upon past research to approach this aim.

Ahlin, Douds, Howard, and Stigerwalt (**IN PRESS**) found that, at least for VTCs within Pennsylvania, although similar approaches are taken by VTCs throughout the state, there are a number of differences. These differences, such as eligibility requirements, necessity of existing Veterans Affairs' (VA) benefits, and referral processes, allow VTCs to abandon the one size fits all model that the more traditional court system follows, allowing them to adapt to varying situations presented by participants entering the courts across the state. Furthermore, Ahlin et al. put forth recommendations based off of their findings that aid in promoting future research on VTCs within and outside of their state of study. To address the lack of empirical knowledge regarding recidivism risk factors among justice-involved veterans, Blonigen et al. (**IN PRESS**) interviewed 63 specialists from the Department of VA Veterans Justice Programs. The researchers compared interview responses regarding treatment practices and compared them with the risk-need-responsivity (RNR) model of offender rehabilitation. Results show that although the majority of risk factors presented by justice-involved veterans were addressed, only slightly more than half of Veterans Justice Program specialists reported any treatment options addressing antisocial tendencies and associates. This finding is important for future research to address, especially considering the impact these variables have on predicting criminal recidivism.

May, Stives, Wells, and Wood (**IN PRESS**) and Logan and Pare (**IN PRESS**) evaluate the important, yet understudied, population of incarcerated veterans. Methods of referring veterans vary between court locations with difficulties presenting themselves regarding justice-involved veterans accepting initial services and the retention of the court participant's post-plea. May et al. find that within the incarcerated veteran population, veterans are less likely to accept community sanctions (e.g., VTC participation) in place of prison sentences than their non-veteran counterparts. The fact that veterans are less likely to accept community sanctions highlights the need to not only understand why this is occurring but also what can be done to assist more veterans through VTC services. Logan and Pare find that veterans adapt to life in prison far better than their non-veteran counterparts, a potential by-product of their military conditioning and higher levels of education and age range. Interestingly, results also show no support for the violentization theory that posits the military has a brutalization effect on its members, increasing their difficulty adjusting to life while incarcerated. However, the presence of PTSD was found to exacerbate violent victimization at higher rates within the veteran population than the non-veteran population.

Although research on VTCs has been expanding since their inception in 2008, there is still much work to be done. This *CJPR* special issue was intended not only to spark current research that would provide preliminary answers to questions surrounding court operations, treatment options, and incarceration effects, but also to provide future researchers a solid framework with which to operate from. Having the privilege of working with the *CJPR* and reviewing the articles within this special issue focused on justice-involved veterans, I believe that this framework has been successfully laid.

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