

INTRODUCTION TO THE ISSUE ON VETERANS TREATMENT COURTS

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At a time when the United States is engaged in its longest military conflict to date, social and scientific attention to the effects of military experience has increased in recent decades. Although these issues and relationships have been of interest historically, scientific research across multiple disciplines has increasingly focused on these issues and has been aided by advances in science, medicine, and technology.

Although the extant research on the link between military service and criminal behavior is broad and sometimes mixed, it indicates that complex relationships related to military training and service can exist across the numerous dimensions over the life-course. For example, issues often related to criminality, such as substance misuse, mental health issues, and homelessness, have been linked to certain military experience (Brown, 2011; Brown et al. 2013; Cavanagh 2011; White, Mulvey, Fox, and Choate 2012; Wright, Carter, and Cullen 2005).

With the dissemination of study results on various indirect relationships to broad audiences in various formats, our societal awareness and understanding of this constellation of issues has grown. There is a general acceptance that relationships can exist between military service, trauma, mental health issues, substance-using behavior, housing instability, and utilization of treatment and services. This widespread recognition has contributed to responses from a variety of institutions.

The criminal justice system's most notable programmatic innovation in response to the intertwined challenges affecting veterans and military personnel is the veterans treatment court (VTC). The VTC is a type of treatment court (also referred to as specialized, specialty, or problem-solving court) that diverts² offenders with a record of US military service from the traditional criminal justice process to its program. Similar to other treatment court models (e.g., drug courts, mental health courts, co-occurring disorder courts), the VTC aims to increase participants' well-being and facilitate successful re-integration into society by addressing the underlying causes and correlates of criminal behavior, thereby also reducing recidivism and improving public safety. Treatment and service engagement and fulfillment of other requirements (e.g., vocational training, employment, physical medical attention, restitution, family re-unification) are mandated and monitored by the VTC.³

Although it has been described as "a hybrid of drug and mental health treatment courts" (Russell 2009: 365), the VTC model has key elements that make it unique (Baldwin and Brooke In Press; Baldwin and Drapela Forthcoming). What distinguishes the VTC from these treatment court models, as well as others (e.g., co-occurring disorder, prostitution, DUI/DWI, domestic violence, and gun courts),

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²This is not to say that VTCs are diversion courts. VTC participants have entered the program at various stages throughout and even after the criminal justice process (e.g., pre-plea, post-plea, post-conviction, post-sentencing) (Baldwin, 2003; Baldwin 2015; Cartwright 2011; Douds, Ahlin, Howard, and Stigerwalt In Press; Holbrooke and Anderson 2011; Justice Programs Office 2016).

³For early works providing detailed descriptions, see Baldwin (2013), Cartwright (2013), Cavanaugh (2011), Glassford (2013), Hawkins (2009), Holbrook and Anderson (2011), Russell (2009), and Totman (2013).

is its eligibility requirements, participating stakeholders, and programmatic elements. The VTC uses what is essentially an employment status (military service) as the primary qualifier for its target population instead of an offense type or extra-legal issue. Additionally, the US Department of Veterans Affairs joins the stakeholder table in the VTC. Finally, two hallmarks of these programs are their peer mentorship component (use of veteran peer mentors to support participants) and incorporation of subculture, obviously military subculture.

VTCs were created through judicial innovation—borne out of personal observations, not systematic evaluation or scientific inquiry. In the 2000s, judges were noting that a significant number of offenders appearing in their courtrooms had a history of military service. Additionally, these judges reported that many of these offenders also had mental health issues and/or substance-misusing behavior. Judicial initiative established the first VTC in 2004 in Anchorage Alaska (Smith 2012) and the model serving as the catalyst for widespread dissemination in Buffalo New York in 2008 (see Russell 2009). Recent reports indicate that there are between 300-500 VTCs in operation across the country (Flatley, Clark, Rosenthal, & Blue-Howells 2017; Justice Programs Office 2016; National Institute of Justice 2018).

Despite the growing popularity of VTCs, the body of VTC research is not fully developed but has been emerging in the wake of their rapid adoption. As multi-disciplinary research has and continues to discover the complexity of the role that military training and service can play in the lives of veterans, service members, and those with whom they are connected, VTC research must follow suit in taking a multi-disciplinary approach. Further, VTC research must be translational with researchers making concerted efforts to relate findings to practice, conduct evaluation science, disseminate findings to practitioners, and work with programs to empirically improve efficacy and impact.

This issue of the *Drug Court Review* focuses on various aspects of the VTC in effort to further develop our knowledge base and call attention to areas of needed consideration and more attention in the field. This issue is comprised of a set of articles addressing hot topics most reported by treatment court practitioners, lawyers, and judges, as well as VTC researchers. The issue begins with “Developing the Veterans Treatment Court.” This practice note by Judge Russell recounts the impetus and creation of one of the longest running VTCs in the country and highlights key elements of its structure and operation.

The next article was developed in response to national reports of challenges in the identification of potential VTC participants and is the first article published from the National Institute of Justice’s multi-site evaluation of VTCs. The research article “Identifying Those Who Served: Modeling Potential Participant Identification in Veterans Treatment Courts” examines the mechanisms, components, and processes of identification across eight VTCs. My co-authors, Dr. Hartley and Dr. Brooke, and I also identify challenges and successes of identification models across a variety of VTCs, offering several recommendations to improve identification practices and support further research.

The next three research articles address various aspects of the VTC experience from the roles of participant and mentor and grapple with issues of procedural justice, legitimacy, and legalizing treatment. Dr. Gallagher and Ms. Warner integrate work on PTSD risk and protective factors, criminogenic risk among veterans, and theories of justice in their research article, “Perceptions of Procedural Justice and Legal Legitimacy in Veterans Treatment Courts: Correlates with PTSD Risk Factors.” The work dis-

covers and discusses the importance of probable PTSD, military homecoming, and civilian reintegration on procedural justice and legitimacy, which may affect program outcomes.

Peer mentorship is then tackled by Dr. Lucas in “An Exploratory Study of Veterans Treatment Court Peer Mentors: Roles, Experiences, and Expectations.” While peer mentorship is used by the majority of VTCs across the country, many programs have reported challenges related to these components, such as defining mentor roles, achieving an adequate number of mentors, and understanding important criteria for matching. In this research article, Dr. Lucas obtains peer mentor perspectives and experiences and examines how mentors interpret and approach their role and its place within the VTC; the importance of and relationships between trust, friendship, and confidentiality; feelings of separation from the court treatment team; and the need for training and preparation.

Subsequently, the legalization of treatment within a mentor VTC is examined in “‘We Quell the Storm, and Ride the Thunder’: The Legalization of Treatment in Veterans Treatment Courts.” Dr. Sherman’s ethnography explores how treatment becomes formalized within the court process and what consequences, both positive and negative, may result. The coercive nature of legalizing treatment is discussed and is of interest to many working in VTCs, as well as other treatment courts.

Finally, Judge Pinski focuses on the role of the prosecutor and constitutionality of the prosecutorial veto in his legal commentary, “The Constitutionality of a Prosecutorial Veto in Veterans Treatment Courts.” He argues that the use of the unilateral prosecutorial veto in VTC enrollment threatens the constitutional rights of due process and equal protection. He holds that VTCs must safeguard these constitutional rights and discusses how programs can go about ensuring their protection.

When taken together, the articles reflect the complexity of VTC operations and their widespread effects. They also indicate the infancy of the current field of VTC research and call attention to new areas of inquiry, stressing the need for a multi-faceted approach. My hope is that this issue inspires its readers to respond with their own systematic examinations of VTCs and to strive to have their work impact policy and practice on the ground.

These are no small feats, and there is much work ahead of us. Not only are the effects of military experience far-reaching and veterans and service members will continue to return from our country’s longest engagement in history, but the full effects of this era’s veterans may not be seen until 2040 (Institute of Medicine 2010). Similar to drug courts, I believe VTCs have become a staple of our criminal justice system. They have changed the face of the criminal justice system in their aims to increase the well-being of veterans and service members and help them achieve successful reintegration into civilian society.

Wars and their effects are a continuing, permanent part of the personal and political landscapes that paradoxically demand incorporation and defy ready integration into an acceptable world view. The warrior’s image, his wounds, and the world he comes home to are a story that has been retold in Western culture at least from the time of Homer. The lessons of the Odyssey are the same as those of late-twentieth-century social science – wars may end, but they continue to reverberate in the lives of those who fought them and within the soldiers’ societies. (Modell and Haggerty 1991)

In closing, I would like to thank this issue's authors, reviewers, and board members for their contributions. Their commitment to advancing the VTC field through this issue of *Drug Court Review* was apparent throughout the process, and without their combined effort, this issue would not have happened. The board saw the need for the issue to focus on VTCs. The multidisciplinary reviewer panel supplied thorough and meaningful critiques, and I believe that even those articles that did not make it in this issue benefitted from their reviews. Finally, I cannot say enough about the patience and diligence of both the authors and the Justice Programs Office team. The time has finally come for them to see their hard work in print.

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