

2022

## Veteran Defendant Reasons for Opting Out of Veterans' Treatment Court

Delilah A. Moore  
*Walden University*

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# Walden University

College of Psychology and Community Services

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Delilah A. Moore

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Review Committee

Dr. Joseph McMillan, Committee Chairperson,  
Criminal Justice Faculty

Dr. Michael Salter, Committee Member,  
Criminal Justice Faculty

Dr. Michael Klemp-North, University Reviewer,  
Criminal Justice Faculty

Chief Academic Officer and Provost  
Sue Subocz, Ph.D.

Walden University  
2022

Abstract

Veteran Defendant Reasons for Opting Out of Veterans' Treatment Court

by

Delilah A. Moore

MS, Kennesaw State University, 2015

BS, Kennesaw State University, 2008

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

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Criminal Justice

Walden University

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## Abstract

Veterans' treatment courts (VTCs) are problem-solving courts created to address the specific treatment needs of veteran defendants. Consistent with general strain theory, the stressors of military service can lead to negative emotions that have been linked to criminality. Despite the favorable results of studies on the efficacy of VTCs to reduce recidivism, participation is voluntary, and not all eligible candidates elect to participate. The purpose of this study was to discover why defendants choose to opt out. Understanding the barriers to participation is critical for VTC actors charged with providing treatment to as many veterans as possible. A qualitative study was designed to learn from VTC coordinators, prosecuting attorneys, and public defenders in the state of Georgia the reasons why defendants decline VTC participation. The data collected from 33 survey participants were analyzed thematically and suggested the primary reasons for VTC opt-out are rigorous program requirements, readiness to accept treatment, less strenuous alternatives, and the perceptions of programming and leadership. To overcome these obstacles and maximize participation in VTC, respondents recommended programs expand eligibility to more veterans, enhance benefits, reduce program intensity, and raise awareness of VTC as a court processing option. The findings of this study provide a better understanding of the factors justice-involved veterans weigh when making VTC determinations and what changes to practice are most likely to result in increased participation. Diverting VTC participants from the prison system has the potential to reduce the financial cost of incarceration and promote the lasting positive social change benefits of restoring veterans to their health, families, and communities.

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## Dedication

For my late father, Lawrence Parker.

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## Chapter 1: Introduction to the Study

### **Introduction**

The exacting toll of war on the mental health of military service members has contributed to a veteran offender phenomenon. Posttraumatic stress disorder (PTSD) and the development of maladaptive behaviors are of particular concern for veterans attempting to readjust to civilian life after service. Alcoholism and drug addiction are examples of such maladaptive behaviors that can contribute to veteran criminality. In response to these concerns, veterans' treatment courts (VTCs) have been established by multiple jurisdictions in the United States to provide military veteran offenders with an alternative to traditional court processing (McCall et al., 2018). These diversion courts offer substance abuse treatment, mental health counseling, and peer accountability to rehabilitate veterans and prevent their further involvement in the criminal justice system (MacLeish, 2020).

The first VTC in the United States was established in Anchorage, Alaska in 2004. In 2008, a VTC was created in Buffalo, New York. The Buffalo court became the standard by which future veterans' courts would be modeled (Edwards et al., 2019). Founded on the community-based problem-solving model, VTCs are designed to specifically address addiction and mental health issues (Lennon, 2020). Roughly 500 VTCs are presently operational in the United States (Rowen, 2020). The purpose of VTCs is to provide veteran offenders with treatment-centered programming and lenient sentencing. The rationale for the program is that veterans who receive treatment, such as mental health counseling and anger management, are less likely to reoffend than veteran

offenders who undergo traditional court processing. Research supports that theory with significant promise. Traditionally, recidivism rates are in the range of 70% for general offenders (Frederick, 2014). Early studies of VTC graduates, however, have reflected a less than 2% recidivism rate (Frederick, 2014).

The criminal justice system is plagued with overcrowded prisons, insurmountable caseloads, and seemingly unbridled recidivism (Baldwin, 2017). Research has also identified that approximately 44% of prisoners reoffend within the first year of their release alone (U.S. Department of Justice, 2018). While practitioners and academics alike have debated best practices for dealing with criminal offenders for centuries, there remains little knowledge of what, in reality, is effective. Despite the uncertainty of what definitively works to deter criminal behavior, rehabilitation offers the most promise. Providing mental health and substance abuse treatment to veteran offenders as a group not only has the potential to reduce crime and incarceration rates but can also result in a reduction of homelessness and suicides (Lucas & Hanrahan, 2016).

Efforts to rehabilitate justice-involved veterans should not originate solely from a desire to unburden overtaxed systems but from a sense of duty and moral obligation. Veterans have sacrificed greatly during their service to the nation, and they deserve treatment for the damages of war to their mental health. The criminal justice system can be a critical part of the solution to veteran criminality by providing VTCs designed to maximize positive outcomes for veterans. This study was an attempt to better understand what obstacles to treatment exist for veteran offenders so that they can be removed and treatment can begin. Chapter 1 provides background information, including the history

and development of VTCs, related studies on the subject, and the gap found in the literature that this research fills. Included in Chapter 1 is the research question that was answered by the present study, the problem that makes VTCs worth studying, and the overall purpose and significance of this research. The theoretical basis, assumptions, scope and delimitations, limitations, and nature of the study are also outlined in Chapter 1.

### **Background**

Elbogen et al. (2012) offered general strain theory (GST) as an explanation for the relationship between trauma exposure and antisocial behavior, providing insight into why the traumatic experiences of war veterans may contribute to the anger and irritation, putting them at greater risk for arrest and underscoring the need for treatment. Bennett et al. (2018), Traynham et al. (2019), and Lennon (2020) provided additional support in favor of treatment, explaining the link between stress, trauma, and criminality among veterans. They proposed treatment of PTSD and other psychological conditions over punishment, further establishing the need for specialized courts. Morris et al. (2018) explained the connection between mental health, substance use, and criminality, suggesting that readiness to change is related to veteran recovery and, by extension, may also play a role in a veteran defendant's decision to opt out of VTC.

While the need for mental health and substance abuse treatment among veteran offenders is widely acknowledged, participation in VTC is voluntary. To understand veteran offender rationale, Adams et al. (2019) and Ahlin and Douds (2020) provided identity theory as a theoretical base for understanding why veteran defendants may resist

participation in VTC. Their studies, however, sampled only VTC participants and not justice-involved veterans who, in fact, declined VTC in favor of traditional court processing. Gallagher et al. (2017), Herzog et al. (2019), and MacLeish (2020) utilized qualitative methods to investigate experiences with, and perceptions of, veterans' courts, uncovering key positive and negative aspects of VTC according to participants. Despite the insights gained from these studies, a gap existed because they did not represent the rationale of veteran defendants who chose traditional court processing over VTC programs.

In this study, I sought to discover the reasons why veteran defendants would refuse to participate in a treatment court that is designed for their benefit. Ahlin and Douds (2020) conducted semistructured interviews of VTC participants to gain a better understanding of veteran culture, as understood through the lens of identity theory. My study differed from theirs in both theory and population. While identity theory forms the theoretical base of other related studies, this study relied upon GST to explain criminal motivations, recidivism, and external stressors that may contribute to a defendant's decision not to receive treatment. Rather than study veterans who elected to participate in VTC, I looked to those who elected not to participate, as reported by VTC coordinators and criminal attorneys. Nonparticipants were the focus of this study because learning the factors they considered that resulted in their declination of VTC is the most appropriate way to identify the hurdles to VTC participation.

The VTC coordinator perspective allows for a more holistic understanding of the veteran defendant rationale because it does not rely upon individual experiences but is



informed by the coordinator's interactions with and knowledge of a multitude of clients and the myriad reasons they represent. Public defenders and prosecuting attorneys in districts with a VTC and who have experience working with veteran defendants were also surveyed using the same questionnaire adapted to their role. Open-ended surveys were distributed to the VTC coordinators in the state of Georgia listed on the Council of Accountability Court Judges (CACJ) of Georgia website (see Figure 1) and to defense and prosecutorial attorneys in the corresponding counties and circuits. The survey questions asked practitioners, based on their knowledge and experience, why eligible veteran defendants decline participation, what reasons eligible veterans gave for declining participation, and what changes to their program they believe would result in more favorable outcomes for justice-involved veterans.

### **Problem Statement**

According to a 2015 report by the Bureau of Justice Statistics, nearly 181,500 military veterans were incarcerated in a jail or prison, representing 8% of the total inmate population in the United States (U.S. Department of Justice, 2015). Approximately half of all veteran inmates have been diagnosed with a mental disorder (U.S. Department of Justice, 2015). The intersectionality of veteran criminality and mental illness is the driving force behind the propagation of VTCs. Prior to the establishment of VTCs, the criminal justice system was not sufficiently equipped to deal with the needs of veteran offenders (Herzog et al., 2019). VTCs are now a critical component of the criminal justice discipline, providing treatment and support developed for the needs of veterans while maintaining legal accountability.

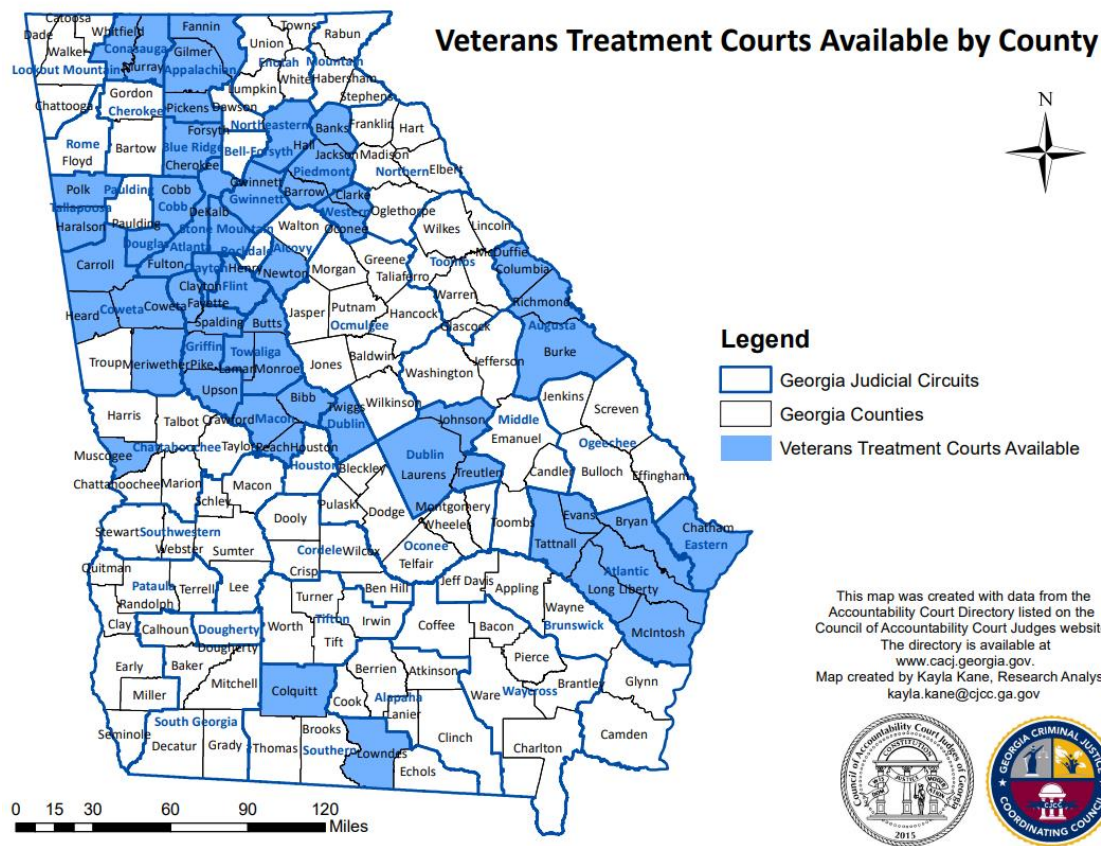
As is the goal with other problem-solving courts, VTCs are designed to reduce recidivism by targeting specific crime-related factors, including mental illness and substance abuse. This approach is consistent with therapeutic jurisprudence, a criminal justice reform that blends retribution and rehabilitation for the purpose of improving the psychological welfare of offenders (Rowen, 2020). Considering the significant representation of veterans among the offender population, representing 8% of the total inmate population in the United States, VTCs are positioned to serve a substantial number of Americans who become involved with the criminal justice system and require treatment.

VTC programs were created to provide military veteran defendants with an alternative to standard court solutions. More than simply a sense of duty or moral obligation to veterans, the reason for their special treatment lies in the belief that veteran offenders require more assistance overcoming maladaptive behavior and criminal involvement than nonveteran offenders (Lennon, 2020). Participation in VTC, however, is voluntary, resulting in a segment of veteran offenders who do not receive the treatment and lighter sentencing benefits these specialized courts provide. Several decision-making factors, including personal shame and perceived stigmatization, have been identified as concerns by veterans who chose to participate in VTC (Ahlin & Douds, 2020). A gap in understanding has been the rationale of veteran defendants who refuse admittance into a VTC program. While shame and stigmatization may be contributing factors for veterans who refuse VTC participation, as suggested by the findings of Ahlin and Douds's (2020) study of VTC participants, it should not be assumed that these are the primary or only

reasons for their decision. Furthermore, those reasons may not extend to the inclusion of justice-involved veterans who decline treatment. There are other recent studies, however, that have offered additional explanations.

**Figure 1**

*Map of VTCs in Georgia*



*Note.* From “Veterans Treatment Court Map” by the Council of Accountability Court Judges, n.d. (<https://cacj.georgia.gov/veterans-treatment-courts>). In the public domain.

Morris et al. (2018) explained the connection between mental health, substance use, and criminality, suggesting that readiness to change (RTC) is related to veteran recovery and, by extension, may also play a role in a veteran defendant's decision to opt out of VTC. The researchers found the greater depression, anxiety, and insomnia reported by veterans, the greater they perceived the need to change their substance use. These findings suggest the more prevalent the symptoms of mental health problems, the more ready veterans are to change their use of alcohol and opioids. In terms of the VTC decision, refusal to participate may be related to a veteran's failure to perceive their need to change. Both studies by Ahlin and Douds (2020) and Morris et al., however, examined VTC participants only and did not explore the factors that influenced nonparticipants. Examining and understanding the factors that contribute to veterans' decisions to opt out of treatment can help VTC developers and practitioners design programs that address veteran concerns and potentially maximize participation in veterans' courts.

### **Purpose of the Study**

The purpose of this qualitative study was to discover the reasons why veteran defendants choose to decline participation in VTC. As the literature review will illustrate, research has already been conducted on related topics, including the factors veteran offenders who elected to participate in VTC considered when making their decision. Why justice-involved veterans opt out of VTC in favor of traditional court processing, however, has remained unanswered. To address this gap, electronic surveys of VTC coordinators and prosecutorial and defense attorneys were conducted to learn what

insights they had into the veteran defendant rationale for refusing specialized treatment offered by the court system.

### **Research Question**

Research question (RQ): What factors do veterans' treatment court actors identify as the reasons why veteran defendants decline participation in VTC programs?

### **Theoretical Framework**

The framework for this study was based on GST. Agnew's (1992) theory provides insight into general criminal motivations, which may help to explain why veteran defendants would refuse treatment designed to confront the maladaptive behaviors contributing to their criminal involvement. Readjusting to civilian life after military service presents a number of challenges, and GST offers a framework for understanding the impact of external strains on veterans that not only may have led to their criminal behavior but would further influence their decision to refuse the help of corrective interventions. GST argues that stressors increase negative emotions, such as anger and frustration. These negative emotions, in turn, cause pressure for corrective actions that can result in criminal behavior (Agnew, 2001). Negative emotions stem from innumerable sources and, for veterans, some of those sources are directly linked with their service in the armed forces. For example, what was once referred to as shellshock, or battle fatigue, is now understood to be a serious psychological condition known as PTSD. When untreated, PTSD can significantly impact a person's ability to function, cope with stress, and maintain relationships (Edwards et al., 2019). PTSD is just one of

many examples of strain that can contribute to a veteran's dependence on illicit substances and involvement in other criminal behaviors, consistent with Agnew's theory.

GST has formed the theoretical framework for research involving veteran-specific mental health issues and criminality. Elbogen et al. (2012) examined the relationship between traumatic experiences or stressful environments and antisocial behavior. The authors hypothesized that veterans with PTSD or traumatic brain injury (TBI), and who report irritability and anger, are at higher risk for arrest. Results of survey data analysis indicated a statistically significant relationship between veterans with PTSD or TBI who reported anger or irritability and higher arrest rates. The authors offered Agnew's GST as an explanation for the relationship between trauma exposure and antisocial behavior.

GST provides insight into why the traumatic experiences of war veterans may contribute to anger and irritation, which puts them at greater risk for arrest. For veterans who have turned to criminal behaviors as their means of coping with trauma and stress, GST also offers a better understanding of why veteran defendants may find it difficult to accept treatment. According to Agnew's theory, criminogenic coping behaviors are more likely under certain conditions and by individuals possessing a particular set of characteristics (Agnew, 2013). Veterans with psychological disorders, anger, and frustration, and who are experiencing strain, may be at greater risk for criminal coping. While that emphasizes the need for treatment, they may be reluctant, unwilling, or even unable to abandon their coping methods. With the understanding that strain may influence veteran decision making, the RQ was a qualitative one, designed to explore the reasons why veteran defendants refuse treatment. The answers to the RQ can allow

practitioners to develop VTC programs that target the main stressors influencing justice-involved veterans' behaviors and treatment decisions. A more detailed explanation of this phenomenon will be provided in Chapter 2.

### **Nature of the Study**

A qualitative inquiry method was used to understand the reasons, according to VTC coordinators and criminal attorneys, for veteran defendants' refusal to participate in a VTC process. Because the subject of diversion courts for veterans is still a novel one, a qualitative method was necessary for discovering as much new information as possible with questioning that was nonleading and exploratory. With GST as the theoretical foundation, the research design was used to help me understand what external strains influence veteran offenders' decision making. Once data obtained through qualitative means were collected, they were analyzed by theming to determine what factors coordinators identified as most influential in veterans' VTC decisions. Additionally, defense attorneys and prosecutorial personnel were surveyed for triangulation purposes, corroborating findings across all sources.

### **Definitions**

The following operational definitions are provided to clarify terms and their meanings as used in this research:

*Veteran*: A former member of the United States armed forces (Erickson, 2016).

*Veteran offender/Veteran defendant/Justice-involved veteran*: A veteran detained by or under the supervision of the criminal justice system (Huskey, 2017).

*Veterans' treatment court (VTC):* A court-supervised program for veteran offenders with treatment needs (Frederick, 2014).

*Veterans' treatment court (VTC) coordinator / director:* A court member who manages daily operations of the VTC (Cobb County Superior Court, n.d.).

### **Assumptions**

Although identity theory, among other theories, has been presented in related studies as a theoretical basis for veteran offender decision making, it may not incorporate the motivations of those who ultimately opt out of VTC. Existing research does not adequately address the rigors of veterans' treatment programs and how program requirements may impact participation. The presence of mental health and substance abuse issues does not exclude the possibility of more practical obstacles to treatment. VTC coordinators and criminal attorneys are positioned to provide information that may reveal additional factors that are considered when veteran defendants make their court processing decision. Following a cursory review of several VTC program websites, it is apparent that the time commitment necessary to fulfill requirements is significant. The decision to decline participation may be the result of a simple cost-benefit analysis, weighing the time, money, and effort involved in successful completion of a VTC program with the benefit of preventing a felony conviction.

A qualitative method was used to understand the breadth of veteran defendant decision making, which did not appear to be fully accounted for by existing theories. Qualitative inquiry is the most appropriate method for exploring motivations within the context of GST, recognizing that "stressors" is defined on an individual basis and can



take many forms. Although offender motivations are highly variable, it can be assumed that jurisdictions with comparable demographics are likely to report similar experiences. With that in mind, demographic data for the agency represented by each survey participant were documented to furnish readers with sufficient information to make an informed transferability determination.

### **Scope and Delimitations**

This study was designed to discover the factors involved in a veteran defendant's decision to decline participation in VTC. Understanding the difficulty of accessing the veteran defendant population for research purposes, VTC coordinators were selected as the primary population for study. Defense attorneys and prosecutorial personnel with experience working with veteran offenders and veterans' court systems were surveyed as a complementary source to corroborate data collected from VTC personnel. Justice-involved veterans have been excluded from this study to avoid causing harm to a vulnerable, if not protected, population. Insight from defense and prosecutorial attorneys provided a valuable perspective because they work one-on-one with the population of interest at the critical time a court processing decision is made. VTC coordinators are knowledgeable of program candidates and are likely to recognize what issues are preventing eligible defendants from participating in their respective court program. Because reasons may vary across courts, multiple agencies within the state of Georgia were solicited for survey completion.

Georgia was selected out of convenience and because the state contains a sufficient number of VTCs to produce valuable data. I created three surveys by sampling

relevant survey questions from instruments used in related peer-reviewed studies and adapted to VTC coordinator, prosecuting attorney, and defense attorney roles. Study solicitation emails were sent to the VTC coordinators listed on the CACJ of Georgia website and to defense and prosecutorial attorneys in the corresponding counties and circuits. Survey questionnaires were brief and contained only the questions necessary to answer the RQ. While in-person and telephonic interviews are traditionally believed to result in more detailed responses, surveys via email were the only method employed, allowing participants to engage with the questionnaire at their convenience within the sampling timeline. Data collection occurred during a 7-week period to allow ample time for introductions, questions, and follow-ups between myself and survey participants. Further detail will be provided in Chapter 3.

### **Limitations**

Anticipated challenges included cooperation with VTC actors and the existence of a suitable number of demographically comparable Georgian agencies necessary for meaningful analysis. A limitation of the study was that it relied upon the understanding and accounts of VTC coordinators and attorneys rather than veteran defendants, for the purpose of protecting a potentially vulnerable population. While it is reasonable to conclude that coordinators and criminal attorneys are knowledgeable of the obstacles justice-involved veterans encounter, it is possible that the factors influencing veteran defendants to opt out are not communicated back to the VTC by the defendant or to their counsel. It is also possible that VTC coordinators misinterpreted veteran defendant motivations, which could have resulted in their misrepresentation in this study. That

possibility underscored the importance of source triangulation. Defense and prosecutorial attorneys were surveyed to understand the matter from their perspectives, as their respective roles with veteran defendants differ from VTC personnel. The additional viewpoints provided a more comprehensive and balanced understanding of the subject than the VTC coordinator perspective alone. Multiple sources of data also helped to compensate for any biases on the part of individual participants and participant groups.

To mitigate the possibility of response bias, survey questions were phrased with neutral language to avoid leading the respondent to a particular response. Questions were open-ended to discourage acquiescence or dissent bias. To mitigate the potential for personal bias, questions asked the respondent's opinion regarding veteran decision making and also asked what reasons veterans themselves have offered to the respondent as factors influencing their treatment decision. Giving respondents an opportunity to express their subjective opinions in one question and provide more objective knowledge on the same issue in a separate question should have prompted the respondent to recognize that their opinions were not expected to mirror what they have been told by prospective VTC participants. Phrasing the same question in two ways may have also resulted in conflicting information. To illustrate, if a respondent's opinion on veteran decision making differed from what had in fact been communicated to them by veteran defendants, then it is possible that bias existed on the part of the respondent and the inconsistency would have been noted as such. To moderate researcher bias, survey questions were sampled from existing studies on the subject and modified to address the

role of the survey participant (VTC coordinator, defense attorney, or prosecuting attorney). Only questions that served the RQ were included in the survey instrument.

### **Significance**

Due to their novelty, there is limited knowledge of VTCs, and even less is known about the decision-making process of veterans when confronted with VTC as an option. What is known regarding the efficacy of VTCs, however, is favorable. Early reports have shown significant results, as measured by drastically lower recidivism rates for VTC graduates compared to general offenders (Frederick, 2014). Based on that outcome alone, the criminal justice system stands to benefit from increased participation in existing VTCs and the creation of such programs where they are not currently available.

Diversion of veteran offenders from the prison system not only has the potential to significantly reduce the inmate population of the United States, but reintegrating veterans into society by treatment and rehabilitation can have a positive impact on their respective families and communities by reducing substance abuse, homelessness, and suicides (Lucas & Hanrahan, 2016). The topic of veteran-specific treatment is important because military personnel undergo unique experiences that can damage their psyche and they deserve support following their service. If there is a way for the judicial system to help soldiers cope with the mental and emotional aftermath of combat that is contributing to their criminal behavior, then the courts should carefully consider their role in improving outcomes for veteran offenders. The improvement and further utilization of VTCs presents a significant opportunity for the criminal justice system to be involved in promoting positive social change.

This study provides a better understanding of why veterans are not choosing the rehabilitative model of VTCs. Veteran defendants who do not take advantage of the assistance available to them may not rehabilitate and become the productive citizens their communities need. Additionally, this study advances the body of knowledge relative to the benefits of VTCs. Further, insights from this study can assist court administrators with improving the quality and attractiveness of their programs, thereby expanding their services to more veterans. Providing quality treatment to this population in response to their past sacrifices, and in recognition of their prospective contributions, can turn distressed, justice-involved veterans into healthy, self-sufficient citizens.

### **Summary**

VTCs have been established in most states to provide veteran defendants with an alternative to traditional court processing. These diversion courts offer substance abuse treatment, mental health counseling, and peer accountability as a holistic approach to rehabilitating veterans and preventing their further involvement in the criminal justice system. The problem that makes the topic of VTCs worth studying is that participation in such courts is voluntary, resulting in a segment of the veteran offender population that does not receive the treatment and lighter sentencing benefits that such courts provide. The purpose of this study was to examine the reasons why veteran defendants decline participation in specialized courts designed specifically for their physical and mental health needs. To understand the veteran defendant rationale in court processing decision making, open-ended survey questionnaires of VTC coordinators and knowledgeable legal counsel were conducted. Thematic analysis of manually coded surveys revealed what

practitioners know about the reasons why eligible veteran defendants decline participation, as well as changes VTC coordinators and attorneys believe should be implemented to increase veteran offender participation in treatment court. As the literature detailed in Chapter 2 demonstrates, providing treatment to veteran offenders as a group has the potential to reduce crime and incarceration rates, substance abuse, homelessness, and suicides, as well as add to the number of citizens that are capable of meaningful contributions to society.

## Chapter 2: Literature Review

### **Introduction**

VTCs have been created as a diversion program for veteran offenders suffering from substance abuse and mental illness. Such specialized courts offer treatment instead of traditional court processing, yet participation is voluntary. A problem that has been identified is that a number of veterans are opting out and not receiving proper mental health care and substance abuse treatment to address the underlying causes of their criminal involvement. The purpose of the present study was to explore the reasons why justice-involved veterans refuse to participate in VTC programs. Understanding the reasons why veterans decline VTC participation can result in proposed program reforms that, when put into effect, have the potential to maximize VTC participation, extending its rehabilitative benefits to more veterans and reducing veteran incarceration rates.

VTCs are the most recent addition to the problem-solving court movement. Problem-solving courts have been created in the United States to address specific subcategories of crime. A problem-solving court targets one crime issue that is sufficiently prolific to constitute a social problem. The purpose of such courts is to divert a large number of defendants away from jail or prison and provide treatment that will confront the underlying psychosocial issues contributing to criminal offending (Rowen, 2020). Drug courts were the first type of problem-solving court, originating in the 1980s (Lucas & Hanrahan, 2016). Prompted by the overwhelming number of drug-related convictions, an inevitable consequence of the War on Drugs, stakeholders were forced to reevaluate the nation's drug problem. Recognizing that drug addiction was the root cause

of many property and violent crimes, as well as a threat to public health, drug courts were established at the local level to treat addiction, with the purpose of preventing criminal recidivism. In the 1990s, the federal government began funding drug court efforts to assist local and state agencies with the financial burden of drug-related caseloads (Lucas & Hanrahan, 2016). With claims of reduced recidivism and cost-effectiveness supported by empirical research, mental health courts were subsequently developed to address growing concern for crime perpetrated by defendants with mental illness (Lucas & Hanrahan, 2016).

Problem-solving courts, also referred to as treatment courts, blend retribution and rehabilitation to prevent recidivism (Rowen, 2020). Similar to drug courts, mental health courts provide treatment to offenders while they are under community supervision. Mental health courts were created in response to increased interactions between law enforcement and the mentally ill, resulting from widespread closings of mental health facilities in the United States as early as the 1970s (Lucas & Hanrahan, 2016). Rather than continue to imprison offenders with mental illnesses and in need of medicine and treatment, mental health courts were developed to address the vacuum caused by the closing of many psychiatric facilities. Although research has produced mixed results on their effectiveness, mental health courts can, at a minimum, keep mentally ill offenders of minor crimes out of the prison system (Lucas & Hanrahan, 2016).

At the core of each type of problem-solving court is the belief that its constituents are deserving of what some may perceive as special treatment. Drug addiction is no longer viewed solely as a crime problem, and this paradigm shift has inspired the



formation of a court that is equipped to provide treatment for what society now considers to be both a social and public health issue. In recent years, mental illness has also been viewed with a more thoughtful lens. Presuming criminal behavior is not completely within one's control due to mental illness, punishment alone is neither appropriate nor effective. Although controversial, the underlying belief of problem-solving courts that some populations are more worthy of public benefits than others is the same philosophy that has spurred the development of VTCs (Rowen, 2020).

Modeled after drug and mental health courts, VTCs address the social, psychological, and medical needs of veterans (Rowen, 2020). Despite their similarities, VTCs offer to veterans what other problem-solving courts cannot. War trauma, the existence of a distinct military culture, and difficulties veterans experience reintegrating into civilian life are significant considerations that drug and mental health courts are not designed to confront (Rowen, 2020). While VTCs are equipped to handle such concerns, a sense of veteran identity has been theorized by some researchers to influence a veteran defendant's decision to participate in a VTC program (Adams et al., 2019; Ahlin & Douds, 2020). The juxtaposition of a veteran identity and a criminal identity can be a shameful mental hurdle for veterans to overcome when making their treatment decision. In studies where veterans elected to participate in a VTC program, however, the feedback on VTC programming was decidedly favorable (Gallagher et al., 2017; Herzog et al., 2019; MacLeish, 2020). Despite the favorable perceptions that veteran offenders generally have of VTC programs, some veterans refuse participation and choose traditional court processing.

An alternative explanation for refusal to participate in VTC may be the link between criminality and substance abuse. RTC is a term that scholars have used to explain a substance user's readiness to seek or accept treatment (Morris et al., 2018). RTC may, by extension, play a role in a veteran defendant's decision to opt out of VTC. A veteran may simply be unwilling or unable to abandon their maladaptive behaviors and that could be the primary reason why they refuse treatment. The problem is that little is known about the rationale of justice-involved veterans who refuse to participate in a VTC program. The purpose of this research was to address that problem by exploring the reasons why veteran defendants opt out of treatment.

Increased awareness regarding the comorbidity of stress, trauma, and criminal coping has resulted in greater support for rehabilitative approaches to jurisprudence (Bennett et al., 2018; Lennon, 2020; Traynham et al., 2019). This is particularly true for veterans, who are generally considered to be damaged by their service and, therefore, deserving of treatment. The relationship between trauma exposure and antisocial behavior provides insight into why the traumatic experiences of war veterans may contribute to the negative emotions putting them at greater risk for arrest (Elbogen et al., 2012). Veteran-specific mental health issues, such as PTSD and TBI, are discussed further in this chapter and contextualized within a strain framework. Related issues including anger, suicide, and homelessness are also discussed to provide a base for understanding the interrelatedness of veteran issues and their relationship to veteran offending. A thorough examination of the contributing factors to veteran criminality is a necessary first step to achieve a better understanding of resistance to treatment. Major

studies of veteran participant perceptions of VTCs are examined for critical feedback that may assist in understanding why veteran defendants opt out of VTC programs.

### **Literature Search Strategy**

The academic databases available through the Walden University library were the primary sources of literature for this study. Google Scholar was also used to find articles relevant to VTCs, particularly for known works that were not available in the Walden library. EBSCO, ProQuest, and Thoreau multidatabase searches for peer-reviewed academic journal articles were conducted using various combinations of the following search terms: *veterans treatment court*, *VTC*, *veteran specialty court*, *veteran offender*, *veteran defendant*, *justice-involved veteran*, *veteran issues*, *veteran suicide*, *veteran suicide ideation*, *PTSD*, *posttraumatic stress disorder*, *TBI*, *traumatic brain injury*, *veteran homelessness*, *veteran criminality*, *general strain theory*, *veteran criminal coping*, *veteran rehabilitation*, and *veteran mental health*. A search of the ProQuest Dissertation & Theses Global database using the search term *veterans treatment court* produced 40 dissertations. After a cursory review of each dissertation, none were relevant to the topic of veteran offender rationale for opting out of VTC.

### **Theoretical Foundation**

Agnew's GST was used as the theoretical base for this study. Derivative of sociologist Durkheim's strain theory, GST argues that stressors increase negative emotions which, in turn, cause pressure for corrective actions that can result in criminal behavior (Agnew, 2001). Strain can refer to any negative event or condition, or a negative emotional response, such as anger or frustration, to an event or condition

(Agnew, 2001). GST builds upon earlier strain theories by identifying additional categories of strain beyond economic disenfranchisement. Agnew developed three distinct categories of strain to encompass the vast number of life events capable of causing stress that should be considered by researchers (Agnew, 1992). The three categories include (a) failure to achieve goals, (b) removal of positive stimuli, and (c) introduction of negative stimuli (Agnew, 1992). GST rests on the assumption that these strains cause negative emotions. Agnew later acknowledged the broad scope of the three strain categories and provided further clarification on the types of strain most likely to contribute to criminal behavior.

Recognizing the immeasurable number of stressors grouped under GST's three categories of strain, Agnew sharpened his theory by identifying characteristics of strains most likely to result in crime. Agnew argued strains that are seen as unjust, seen as high in magnitude, associated with low social control, and that create an incentive for criminal coping are most likely to lead to crime (Agnew, 2001). This elucidation was necessary to provide guidance to researchers seeking appropriate strains to account for in their research. In particular, these characteristics can be used as predictors of the types of strain that are likely to result in criminal behavior (Agnew, 2001). For example, strain that is seen as unjust, such as discrimination, is expected to elicit anger, which is an emotion strongly linked to crime (Agnew, 2001). The utility of Agnew's theory germane to veteran offending is most apparent in the examination of criminal coping.

An explanation of the conditions for criminal coping is an extension of GST. GST, as initially posited, offered three broad categories of strain. To provide researchers

with a narrower focus of the strain-crime relationship, Agnew further developed his theory with the identification of four strain characteristics that are likely to result in crime or deviant behavior. Research testing this theory, however, showed those variables had only a modest impact on coping strategy choice (Agnew, 2013). In response, Agnew established three-factor criteria for criminal coping based on the broader coping and stress literature. For criminal coping to be likely, an individual must possess a set of characteristics that collectively create a significant proclivity for criminal coping (Agnew, 2013). Examples of such personal characteristics include low self-control, criminal peers, and beliefs that are favorable to crime (Agnew, 2013). An individual must also experience criminogenic strains that they perceive as unjust and high in magnitude, are associated with low social control, and create an incentive for criminal coping (Agnew, 2013). Examples of criminogenic strains include abuse, criminal victimization, and financial desperation. Lastly, an individual must be in certain circumstances favorable to criminal coping. This element draws from routine activities theory, stating that criminal coping is more likely when the benefits of crime are high and the costs low (Agnew, 2013). The three conditions for criminal coping contribute to the understanding of the relationship between strain and crime by detailing the contextual conditions that are most conducive to crime. Accounting for the contextual factors of crime is critical to a comprehensive understanding of criminal coping as exhibited by the veteran offender population.

GST has formed the theoretical basis of numerous studies on crime but has infrequently been applied to veteran criminality. It is believed GST is a valuable lens for

this research because it provides insight into why the traumatic experiences of military veterans may contribute to anger, irritation, and other negative emotions linked to higher risk of arrest (Agnew, 2001). Elbogen et al. (2012) examined the relationship between traumatic experiences or stressful environments and antisocial behavior. The authors hypothesized that veterans with PTSD or TBI, and who report irritability and anger, are at higher risk for arrest. Results of survey data analysis indicated a statistically significant relationship between veterans with PTSD or TBI who reported anger or irritability and higher arrest rates (Elbogen et al., 2012). The authors offered Agnew's GST as an explanation for the relationship between trauma exposure, negative emotions, and antisocial behavior. Consistent with GST, the strain of traumatic experiences elicits negative emotions that can lead to antisocial or criminal behaviors. The statistically significant relationship between those factors, as evidenced by the research of Elbogen et al., lends credence to the propositions of GST.

For veterans who have turned to criminal behaviors as their means of coping with trauma and stress, GST also offers a better understanding of why veteran defendants may find it difficult to seek or accept treatment. According to GST, criminogenic coping behaviors are more likely under certain conditions and by individuals possessing a particular set of characteristics (Agnew, 2013). For example, veterans with psychological disorders and anger, and who are experiencing strain, may be at greater risk for criminal coping. Despite the need for treatment, veterans may be unwilling or unable to abandon their maladaptive coping methods depending on the frequency and severity of the strain. GST was selected to underpin the present study because of its applicability to the veteran

offender experience, particularly the presence of extreme stressors and their influence on emotions and wellbeing, the contextualization of trauma within the military experience, and the recognition of antisocial behavior as a symptom of coping with stress and trauma. With the understanding that strain may reasonably influence veteran decision making, the RQ was properly aligned with GST. Qualitative inquiry is an appropriate method for exploratory research (Orb et al., 2001) and was used to explore the reasons why veteran defendants refuse treatment. The answers to the RQ can assist practitioners in the development of VTC programs that target the primary sources of strain influencing the behaviors and treatment decisions of justice-involved veterans.

### **Veterans' Treatment Courts**

The first VTC was established by Judges Sigurd Murphy and Jack Smith in Anchorage, Alaska in 2004 (Edwards et al., 2019). Originally a 1-year pilot program, Alaska's VTC was created to address an increasing number of servicemembers appearing in treatment court (Edwards et al., 2019). The program allowed misdemeanants to participate in existing Veterans Affairs (VA) treatment programs instead of the drug and mental health courts available to the public. The first VTC met with minimal support, and its procedures were not documented to allow for duplication by other jurisdictions (Edwards et al., 2019). A standard for veterans' court operation would not emerge until the development of Buffalo's VTC in 2008.

While presiding over the drug and mental health courts in Buffalo, New York, Judge Russell noted the prevalence of veterans in treatment court (Edwards et al., 2019). Recognizing veterans as a unique population, Judge Russell created a VTC by modifying

the drug court model for veterans. The original 10 key components of drug courts include the following:

- integration of alcohol/drug/mental health treatment with judicial processing
- nonadversarial approach
- early identification and prompt placement of eligible participants
- access to a continuum of treatment and rehabilitation services
- alcohol and drug abstinence is frequently monitored
- court responses governed by coordinated strategy
- continuous judicial interaction with defendant
- program evaluation to measure goal achievement
- continuous interdisciplinary education
- forged partnerships among stakeholders (Lennon, 2020)

The first modification Judge Russell made to the existing drug court model was the addition of a mental health treatment component. Second, the court would coordinate with VA programs and receive support from the U.S. Department of Veterans Affairs (Edwards et al., 2019). Third, the court would consider a broader list of cooccurring issues, including those related to combat. Lastly, the court would incorporate a peer-mentorship component. By documentation and publicity of its work, the Buffalo court became the blueprint for other VTCs across the country. According to a 2021 report by the U.S. Department of Veterans Affairs, 601 VTCs were in operation, making them the fastest growing specialized court in the United States and second in number only to drug courts (Baldwin & Brooke, 2019).



## **The VTC Concept**

The key components established by Buffalo's VTC serve as general guidelines for courts to follow. While the design and processes of VTCs may vary by jurisdiction, they typically share common components. After reviewing the websites and online handbooks of several VTC programs in the southeastern United States, it appears their personnel, activities, and desired outcomes are similar. Standard VTC personnel include the judge, program coordinator, case manager, prosecutor, defense attorney, law enforcement, probation officer, and VA representative. The program coordinator manages the court under the supervision of the judge and governing court administration (if applicable). The case manager is the program participants' primary contact person, attending staffing and court sessions and maintaining participant records. The prosecutor attends staffing and court sessions, evaluates participant progress, and recommends sanctions. The defense attorney does the same yet speaks on behalf of the participant in court sessions. The law enforcement officer (sheriff's deputy or police officer) ensures accountability in the program by conducting unannounced field visits to a participant's home and job, as well as participating in staffing sessions. The probation officer's role is to provide reports on compliance matters to the team and attend court sessions. The VA representative attends staffing and court sessions, provides the court team with participants' treatment progress, coordinates treatment services, and makes recommendations for appropriate sanctions.

Typical VTC activities include routine drug screening, mental health counseling, substance abuse treatment, community support meetings, and weekly court appearances. Program length and requirements vary across courts. As an example, a VTC in northern

Georgia consists of five phases (Cobb County Superior Court, n.d.). Phase 1 is a minimum of two months and requires participants to adhere to their treatment plan, attend weekly court and group sessions, meet weekly with their mentor, attend three 12-step meetings per week, meet with a sponsor once a week, maintain housing, provide urine samples, meet with their case manager once per week, and have a minimum of 30 days sobriety and 30 days without a jail sanction. Phase 2 is a minimum of four months and adds on to the previous phase by requiring the participant to find employment, enroll full-time in college or trade school, or enroll in a vocational rehabilitation program. In Phase 2, participants must also develop personalized life goals and present them to the treatment team. Phase 3 is a minimum of five months and reduces weekly court sessions and case manager meetings to biweekly. Phase 4 is a maintenance period lasting at least six months and requires 120 days of sobriety and no jail sanctions in order to move on to the final phase. Phase 5 is a minimum of one month and adds the requirement of writing a letter to the participant's arresting officer and victim, completion of a program packet, and an exit interview (Cobb County Superior Court, n.d.). Phase activities are monitored and verified by court attendance, drug screen results, and mentor, probation officer, deputy, and case manager reports. These activities are designed to improve mental health, support long-term sobriety, reduce recidivism, and assist participants in securing employment and long-term housing.

The common intended outcomes of VTCs are to increase public safety by reducing recidivism, provide better mental health, alcohol, and drug treatment through the VA, and provide intensive case management and structure to veteran participants. The

indicators of these outcomes are measured by the number of active participants per year, the number of program graduates per year (maintained sobriety, employment, and housing), and the recidivism rates for program participants (stayed out of the criminal justice system). As demonstrated, the prototypical VTC program is extensive and often more rigorous than probation. Choosing to opt out of VTC may be the result of a veteran's sense of military identity, as some researchers suggest, but the possibility of perceived program difficulty may also be a contributing factor to a veteran defendant's decision to refuse VTC participation. This study explored the reasons why veterans opt out, yet- whatever the reasons- there are cogent justifications for the existence of VTCs collectively as a vital component of the criminal justice system.

### **Rationale for VTCs**

The rapid proliferation of VTCs has met with its share of criticism, particularly questions regarding the necessity of a specialized court for veterans when drug and mental health courts already provide similar services (Luna & Redlich, 2021). Critics argue that veterans do not require additional support beyond what the civilian population is provided. Proponents of VTC, however, believe that veterans constitute a special population with needs that cannot be properly met by mental health and drug court services alone. To determine the dominant themes regarding the need for VTCs, Baldwin and Brooke (2019) analyzed VTC scholarship and identified four primary justifications for the VTC concept. The rationale for VTCs present in the current body of literature on the subject underscores the need for VTC development and, therefore, makes a critical contribution to the discussion on expanding VTC participation.

The first justification is a presumed link between military service and crime (Baldwin & Brooke, 2019). Initially, claims regarding the positive relationship between military service and crime were largely anecdotal. Beginning with the first VTC created in Anchorage, Alaska, judges' accounts of frequent interactions with veteran defendants were sufficient grounds for promoting VTC programs. As the academic community caught up with the VTC trend, serious questions regarding actual need in the criminal justice system for such programs began to be raised. Furthermore, the empirical validity of VTC program success also came under scrutiny by scholars calling for program evaluation before further implementation of VTCs continued. As a result, empirical research has examined the military-crime link and produced mixed results (Baldwin & Brooke, 2019).

The assumption that military service and crime are linked has been thoroughly studied, dating back to the 1950s with studies involving World War I and World War II veterans (Baldwin & Brooke, 2019). Such studies from then to the present have suffered from severe limitations due to the extreme variability over time of enlistment practices, termination policies, voluntariness of service, age, mental health and capacity, physical fitness, behavior, and criminal history (Baldwin & Brooke, 2019). The unpredictability of the military as an institution and the individuals selected for service have resulted in the inconclusiveness of research studying veterans and crime. Although a direct link between the two has not been firmly established, there are compelling data in support of an indirect link. Studies have demonstrated a positive relationship between military service and crime indirectly through prevalence of substance abuse and mental health conditions

(Baldwin & Brooke, 2019). For example, a longitudinal study of Vietnam veterans found that military service increased individual drug use significantly, positively impacting criminal offending (Wright et al., 2005). A more recent study of Iraqi war-era veterans revealed a statistically significant relationship between PTSD, anger, and higher risk of arrest (Elbogen et al., 2012). Additional studies in support of the indirect link between military service and crime will be discussed further in this chapter.

The call for VTC establishment has not only come from practitioners with courtroom experience suggesting a need exists, but from scholars who have learned of the treatment court's empirical benefits through scientific research (Cartwright, 2011; Lennon, 2020). Despite a lack of concrete evidence directly linking military service to crime, military service has been shown to initiate the drug abuse and mental health disorders known to precipitate criminal behavior. With drug and mental health courts already in place to address these issues, some have argued that a treatment court specifically for veterans is unnecessary. The counterargument justifying the need for VTCs relies on the prevalence of PTSD among veteran offenders, as well as the institutionalization process that veterans experience during their service that does not always resolve itself upon return to civilian life (Baldwin & Brooke, 2019). These veteran-specific issues are the basis for the second justification of VTCs claiming other treatment courts are not equipped to handle the issues that military service causes.

Service-related trauma should not be ignored and addressing it with treatment specific to the veteran experience is the most promising way to correct criminal behavior among this population (Arno, 2015). The second justification for VTCs is, since the

veteran experience is unique and complex, it deserves a targeted approach that drug and mental health courts are not designed to provide (Baldwin & Brooke, 2019). Proponents argue that combat veterans have experienced conditions and situations that civilians could not possibly relate to or understand (Cartwright, 2011; Perlin, 2013). The distinctive strain of military life requires services from providers who are familiar and able to empathize with veterans, which is what VTCs provide (Russell, 2009). Without the military connection between offender and treatment provider, veteran defendants may be reluctant to participate in a traditional treatment program. In recognition of the need for cultural competence, VTC programs are often staffed with military personnel and contain a mentor component that pairs defendants with volunteer veteran mentors (Baldwin & Brooke, 2019). Drawing from peer support characteristic of the military experience, VTCs are in a better position to treat veteran offenders in an environment that nurtures military camaraderie than drug and mental health courts created for civilians (Baldwin & Brooke, 2019).

The third justification for VTCs is that veterans are a class (Baldwin & Brooke, 2019). Eligibility requirements for participation vary, but all VTCs require that participants committed a criminal offense and have served in the United States military. As such, VTC is the only specialized court with an employment status requirement (Baldwin & Brooke, 2019). The reason why veterans have been treated as a class by the judicial system is because of the assumption that veteran status acts as a proxy for the types of diagnoses that would typically qualify for treatment by drug or mental health courts (Baldwin & Brooke, 2019). The assertion that veterans constitute a class is,

arguably, the most controversial of the assumptions regarding the need for VTCs.

Although questions concerning equal protection and fairness of specialized treatment reserved for former service members have been raised, they have not been pursued with fidelity. A lack of any real opposition to the special treatment given to veteran offenders may derive from a sense of indebtedness to this population for their service.

The fourth justification for the existence of VTCs is the assumption that veterans are deserving of special treatment because of the sacrifices they are presumed to have made during their service in the military (Baldwin & Brooke, 2019). This notion is widely accepted, and evidenced by a variety of federal benefits available only to servicemembers and veterans, including VA home loans, health care, and educational aid (Baldwin & Brooke, 2019). Provision of these benefits to a select class clearly emphasizes the belief that the military constitutes a special population worthy of special treatment. A criticism of this assumption is that it is discriminatory in nature by not affording other potentially dangerous occupations with similar benefits. Furthermore, VTC participation is not offered to all veterans. The eligibility requirements of VTCs vary, some allowing participation by misdemeanants only, felons only, and the diagnosis of a mental health or substance abuse disorder (Baldwin & Brooke, 2019). Consequently, not all veteran offenders will qualify for, and receive the treatment and benefits of, a VTC program. Although the consensus may favor the belief that military service justifies special treatment by the courts, even eligible veteran defendants may choose not to participate in VTC for any number of reasons. To understand the reasons why justice-involved veterans opt out of specialized treatment, which was the focus of this study, it is

necessary to have an understanding of this population and the issues they face. The following section will highlight key concerns for the veteran demographic with the purpose of elucidating the contextual factors of their criminal offending that may also influence their treatment decision.

### **Veterans' Issues**

The traumatic experiences of war can have profound and lasting effects on soldiers beyond their terms of service. PTSD and TBI are examples of the physical and mental injuries sustained by those who have endured the horrors of battle. As discussed in the previous section, results of numerous studies suggest an indirect link between military service and crime. Mental health and drug abuse disorders often serve as the bridge between the military experiences of veterans and the criminal coping in which they find themselves involved. PTSD, for example, can manifest in the form of anger and violence, which can lead to criminal offending, arrest, and incarceration. Sufferers of PTSD may also rely on drugs to cope with the troubling flashbacks characteristic of the disorder. Consequently, drug possession and drug-related offenses are responsible for a significant number of veteran-police interactions.

The aftermath of military service for its members is not limited to criminal offending but contributes to other social concerns. Homelessness and suicide are two issues that have been identified as key problems for veterans. The adjustment to civilian life can be a difficult transition for some soldiers returning home. The strain of finding new employment, reintegrating back into family life, and finding a new sense of purpose are daunting challenges that veterans must face (Luna & Redlich, 2021). Failure to meet



these challenges can result in a variety of negative outcomes, including homelessness, suicide ideation, and suicide. This section will address the concerns of mental health, substance abuse, homelessness, and suicide relative to the veteran population. These issues should not be considered in a linear fashion, as they are interconnected and exacerbate one another. Their complex relationship is accounted for by the VTC model, which is a multi-pronged approach designed to address the underlying causes of antisocial behavior. Exploring these key concerns independently and collectively is a necessary measure to achieve a better understanding of the challenges veterans are confronted with, how they are related or contribute to criminal behavior, and their possible role in treatment decisions.

### **Mental Health**

Mental health is a recognized factor in the legal culpability of criminal defendants. The presence of a mental disorder will not necessarily excuse criminal behavior, but it may impact the punitive method chosen for the perpetrator. Mental health courts take an offender's mental health into consideration when making punishment decisions, acknowledging the impact that mental conditions have on behavior. Therefore, treating the mental disorders that are believed to underlie criminal behavior, while still maintaining supervision, is the preferred method for dealing with offenders with mental illness. While civilian diagnoses are not uncommon, veterans are overrepresented as PTSD and TBI sufferers. Numerous studies show these conditions, particularly comorbid with anger, are strongly linked to veteran offending. In fact, approximately half of all veterans incarcerated in the United States have been diagnosed with a mental disorder

(U.S. Department of Justice, 2015). This section will detail key mental health issues affecting the veteran community, how each contributes to criminal behavior, and what services VTCs offer to mitigate these concerns for the purpose of reducing recidivism.

### ***TBI***

TBI and mild traumatic brain injury (mTBI) are characterized by a head injury resulting in memory loss, psychological impairment, or changes in behavior (Umbrasas, 2020). Between 2000 and 2014, over 300,000 service members were diagnosed with mTBI, making it one of the most pervasive combat-related injuries of the modern war era (Umbrasas, 2020). TBI has been associated with emotional processing disturbances, heightened irritability, anxiety, and cognitive deficits (Campbell et al., 2021). In a retrospective study of service members charged with criminal offenses, Umbrasas (2020) examined the forensic evaluations of 80 defendants. Of this sample, 20% had a history of mTBI, suggesting the diagnosis is relatively common among veteran offenders (Umbrasas, 2020). Although TBI studies have produced mixed results in terms of the extent to which TBI affects psychological and cognitive processes, research does suggest that TBI increases the risk for PTSD. Even as an indirect link between military service and PTSD, TBI is a mental health concern that must be considered when treating veteran offenders.

### ***PTSD***

PTSD has become a household term in the post-911 era. Typically associated with military veterans, the acronym is commonly used to describe the psychological fallout of traumatic combat experiences, including flashbacks, anger, insomnia, and violence.

PTSD is a response to trauma exposure involving symptoms of intense fear or horror that are extreme enough to impair functioning (Brown, 2008). More than an unfortunate psychological byproduct of war, PTSD has been associated with risky behaviors, such as drug use, possession of firearms, and aggression (Traynham et al., 2019). As service members continue to return home from extended tours in Iraq and Afghanistan, the disorder has burgeoned into a social problem. Studies consistently report a direct correlation between PTSD and crime (Calhoun et al., 2004; Lapierre et al., 2007; Pandiani et al., 2003; Snowden et al., 2017), resulting in a growing need for veterans to receive mental health treatment as a method of reducing crime and incarceration.

Despite the extensive research on PTSD and crime, very few studies have examined the phenomenon within a general strain theory framework. GST is an appropriate theoretical base for explaining the link between PTSD and crime because it provides insight into why the traumatic experiences of veterans may contribute to negative emotions linked to higher risk of arrest (Agnew, 2001). In a recent study, researchers studied the PTSD-crime relationship from a GST perspective. To test their hypothesis that combat-related PTSD and antisocial behavior are positively correlated, Watts and Wright (2021) utilized data from a national longitudinal study concerning military experience, mental health, and antisocial behavior. A subset of respondents with military experience (N = 1,043) was selected for inclusion in their study (Watts & Wright, 2021). Results of multivariate analyses indicated a statistically significant relationship between combat experience and negative mental health states, as well as a positive correlation between PTSD and crime (Watts & Wright, 2021).

The results of Watts and Wright's 2021 study support earlier research by Elbogen et al. (2012) examining the relationship between traumatic experiences or stressful environments and antisocial behavior. The results of their survey data analysis indicated a statistically significant relationship between veterans with PTSD or TBI who reported anger or irritability and higher arrest rates (Elbogen et al., 2012). The authors relied on GST as an explanation for the positive relationship between trauma exposure, negative emotions, and antisocial behavior. Consistent with GST, the strain of traumatic experiences elicits negative emotions that can lead to antisocial behaviors. The negative emotion most closely linked to veteran offenders with PTSD is anger, prompting additional research on the importance of anger management treatment for veteran offenders.

### *Anger*

Among all of the reintegration obstacles veterans encounter, controlling anger is the most commonly reported (Dillon, Medenblik, et al., 2020). Anger is the root of a variety of problems veterans experience socially, occupationally, and in their family lives (Dillon, Medenblik, et al., 2020). From incidents of road rage to risk of suicide, anger manifests itself behaviorally in ways that cover the gamut from self-destructive to antisocial. A growing concern is the influence that problematic anger has on PTSD treatments. Study results suggest anger is a mediator between PTSD and aggression (Van Voorhees et al., 2016), underscoring the importance of treating problematic anger and other hostile cognitions to improve PTSD treatment outcomes. Anger interventions, such as interpretation bias modification (IBM), have been developed to mediate the

compromising effects of anger on psychosocial treatments (Dillon, Medenblik, et al., 2020). Cognitive behavioral therapy (CBT) and present-centered therapy (PCT) have been shown to effectively reduce anger and PTSD symptoms (Van Voorhees et al., 2021). Despite these developments, veterans with PTSD and anger are typically only treated for their trauma and, as a result, reductions in anger are modest (Dillon, Medenblik, et al., 2020).

Anger among veterans is of relevance to this study due to the role it may play in an offender's decision to accept treatment from a VTC. A logical extrapolation of anger negatively affecting PTSD treatment outcomes is that anger may also influence veterans' decisions to seek, accept, or remain in treatment. That may be especially true for female veterans who, in Van Voorhees et al. (2021) study, had a CBT treatment dropout rate of 100%. A common limitation of multiple studies on VTCs is the lack of gender diversity among program participants, the reasons for which should be the subject of future research. Within the scope of the present study, it should be understood the strains associated with veteran life are not necessarily all trauma-based but include those stressors characteristic of reentering civilian life. It should also be understood that strain associated with both military life and reintegration may vary by gender. Consistent with the framework of GST, traumatic and reintegration experiences of both sexes are examples of the type of strains prompting anger and other negative emotions that are linked to crime. PTSD, TBI, and anger among veterans not only leads to criminal offending, but also contributes to society's other major social problems, including substance abuse, homelessness, and suicide.

## **Substance Abuse**

Substance abuse is a social and public health crisis affecting both civilian and military populations nationwide. Despite the widespread impact, members of the military are more prone to substance misuse and lifetime arrests than civilians (Douds & Hummer, 2019; Snowden et al., 2017). In their study examining PTSD and legal charges among veteran substance users, Bennett et al. (2018) found substance use was associated with nonviolent offenses, while PTSD was associated with violent charges. This finding points to the need for responsive treatment that recognizes the connection between offense types and mental health diagnoses.

While the relationship between substance abuse and criminal offending has long been established, knowledge of self-medicating among veteran sufferers of PTSD and other mental health disorders is still being developed. What is understood is that substance users with mental health problems typically experience poorer treatment outcomes (Bennett et al., 2018). RTC is also reasonably believed to affect treatment outcomes. RTC refers to a substance user's readiness to seek or accept treatment (Morris et al., 2018). A veteran may simply be unwilling or unable to abandon their maladaptive behaviors and that could be the primary reason why they refuse treatment. Since substance use among veteran offenders is often a maladaptive coping mechanism for combat-related trauma, a holistic approach to treatment must be provided to address trauma and the subsequent drug use intended to ameliorate its effects. The presence of mental health concerns makes it especially difficult to engage clients with substance use

disorder (SUD) in treatment (Bennett et al., 2018). Therefore, the comorbidity of SUD and PTSD may present yet another barrier to VTC participation.

### **Homelessness**

Substance abuse is not the only major public health problem disproportionately affecting veterans. Homelessness has long been associated with drug abuse, alcoholism, mental illness, employment difficulties, and criminal offending. As veterans are overrepresented among nearly every one of those categories, they can reasonably be expected to disproportionately experience homelessness. While veterans were less than 8% of the total U.S. population in 2009, they constituted 12% of homeless adults (Tsai, Pietrzak, et al., 2021). In response, the U.S. Department of Veterans Affairs began an initiative to prevent and end veteran homelessness with the creation of federal homeless programs (Tsai, Mehta, et al., 2021). According to data from a 2019-2020 survey of a nationally representative community sample of 4,069 veterans, approximately 10% reported any lifetime homelessness, which suggests an improvement since the VA initiative began (Tsai, Pietrzak, et al., 2021). An acknowledged limitation of the study is that results were based on self-reports and definitions of homelessness were broad (Tsai, Pietrzak, et al., 2021). Despite any suggested gains, veteran homelessness remains a significant issue, particularly due to its relationship with suicide and suicide ideation.

Research data suggesting a connection between homelessness and suicide among veterans are compelling. In studies of veteran homelessness and suicide ideation, the rates of suicide attempts for those who had experienced homelessness were more than five times higher than for those who had not (Tsai et al., 2018; Tsai & Cao, 2019). Although

the same relationship was demonstrated by non-veterans, the association between homelessness and suicide among the non-veteran population was much weaker (Tsai & Cao, 2019). The connection between homelessness and suicide may be due to the risk factors they share. Risk factors common among homelessness, suicide attempts, and completed suicides include mental illness, SUDs, low social support, and low socioeconomic status (Tsai & Cao, 2019). The transient nature of homelessness may also present obstacles to treatment in light of the residency and employment requirements typical of VTC programs.

### **Suicide**

In addition to homelessness initiatives, the VA has also focused clinical and research efforts on suicide prevention. Veterans in the United States are at 22% higher risk for suicide than non-veterans (Dillon, Van Voorhees, et al., 2020). The elevated risk for veteran suicides may be attributed to its interconnection with PTSD and anger (Dillon, Van Voorhees, et al., 2020). Research suggests that anger mediates the relationship between PTSD and suicide (McKinney et al., 2017; Wilks et al., 2019). TBI, depression, and substance abuse have also been identified as contributing factors to suicide risk (Adkisson et al., 2019; Elbogen et al., 2020; Graziano et al., 2021; Wilks et al., 2019). Dillon, Van Voorhees, et al. (2020) found that veterans with PTSD were at a higher baseline risk for suicide, which was further elevated by increases in anger. Increased anger led to relationship conflicts that diminished the social support necessary to reduce periods of distress and suicide ideation. The ability of each risk factor to exacerbate the others emphasizes the need for treatment to be multifaceted, addressing



general strains and those specific to the veteran experience. The sense of hopelessness that accompanies suicidal thoughts may contribute to offending and may also be responsible for a veteran offender refusing help, believing that they are beyond the help of VTC. Elbogen et al. (2020) suggested that treatment protocols include suicide risk assessments to identify those in need of suicide interventions. In their study on religion, spirituality, and suicide risk among veterans, Smigelsky et al. (2020) found that spiritual struggles involving self-forgiveness, purpose, and feeling punished by God were risk factors for suicide ideation and attempts. While positive religious coping is more common, the researchers suggested veterans should be screened for negative religious coping as a potential risk factor for suicide (Smigelsky et al., 2020).

The challenges of TBI, PTSD, anger, substance abuse, homelessness, and suicide are not limited to the veteran experience. Civilians are also confronted with these issues, although, for reasons most likely stemming from combat-related trauma, they appear to impact veterans more severely. With higher risk for substance abuse and homelessness, veterans are also at higher risk for criminal justice involvement. All of these concerns are compounded in wake of the COVID-19 pandemic. The psychosocial toll of the pandemic is projected to have a particularly significant impact on justice-involved veterans (Holliday et al., 2021). Increased mental health symptoms including anxiety and depression, difficulty accessing resources such as treatment, employment, and housing, and increased substance use have been reported since the onset of COVID-19 (Holliday et al., 2021). The strain of the pandemic presents even greater barriers to treatment for veterans experiencing difficulty reintegrating into society. Mandated social isolation, for

example, may diminish the social support veteran offenders need for treatment success. The full impact of COVID-19 remains to be seen, yet it is reasonable to anticipate an immoderate negative effect on justice-involved veterans who already experience undue strain related to their service in the military.

The veterans' issues highlighted in this section represent the dominant themes found in a review of the literature on veteran offending and were selected to provide a knowledge base of the key challenges VTCs must be positioned to confront if their treatment efforts are to meet with success. Understanding the relationship between PTSD, anger, and crime, for example, is not only necessary for developing treatment protocols, but is also necessary for anticipating the barriers to treatment that exist for veteran offenders. The strain of military service, as evidenced by the development of PTSD or anger, creates pressure or incentive for criminal coping, which can take a variety of forms including violence and drug abuse. A veteran offender experiencing rage or engaging in self-harm may not be ready to change or they may believe that their manner of coping is the only effective way to cope with their negative emotions. While the negative emotions may certainly be trauma based, as GST suggests, or otherwise rooted in their military experience, a veteran's sense of military identity is not necessarily responsible for their rejection of treatment as the bulk of current literature suggests. The strains detailed in the section above not only provide insight into the underlying reasons why veterans become involved with the criminal justice system to begin with, but they also form the context in which veteran defendants make their treatment decision. An additional factor that may influence treatment participation is how VTCs are perceived by veterans. The following

section details prevalent perceptions of the VTC concept as documented in studies surveying veterans' court participants.

### **Perceptions of VTC**

Participant feedback is valuable to VTC administrators in their determination of what program components best serve the needs of veteran offenders. Few studies have explored what veteran offenders think of the VTC programs in which they participated. Nearly every one of those studies on veterans' perceptions of VTCs has relied on the viewpoints of active program participants. Little is known about how VTCs are perceived by veteran defendants who declined participation in favor of traditional court processing. Despite scant knowledge in this area, existing studies on VTC participant perceptions do offer some insight into the reservations veterans experience when making their treatment decision. A number of these studies also provide veterans' recommendations for program improvement. The reasons why participants initially hesitated to engage in VTC and their suggestions for enhancing programming may represent some of the concerns held by veteran defendants who ultimately refused VTC participation.

Herzog et al. (2019) conducted a qualitative study of VTC participants to learn their perceptions of the court's processes, their experiences with court personnel, and their military-crime relationship. Eligibility criteria required respondents to be past Phase I of the program and to be willing to discuss court operations. A sample of 13 veteran offenders was recruited from a southeastern VTC using purposive sampling. During the course of interviews, several themes emerged, from which the researchers developed a maladaptive coping model of veteran participant experiences in VTC. The purpose of

their study was to inform the policies and services designed to improve outcomes for veteran offenders.

In their study, Herzog et al. (2019) sought answers to the following three RQs:

1. How do participants perceive their general and judicial experience in VTC?
2. What are participant perceptions of the court actors within the VTC?
3. What is the participants' perceived relationship, if any, between their prior military experience and their current involvement in VTC? (p. 79)

Semistructured interviews were completed in one day in 2017 and each lasted up to one hour. Several themes for each RQ emerged from interview responses. Regarding perceptions of their respective VTC, the main themes identified by Herzog et al. (2019) were that the court offered participants: “(1) a second chance; (2) social support; (3) a stabilizing force; (4) a viable alternative to drug court; and (5) a mechanism to advocate for securing various resources” (p. 81). Over 92% of participants reported a favorable view of the VTC overall (Herzog et al., 2019). Only one respondent did not view the court positively, stating that he was frustrated with program requirements. This sentiment expressed by one dissenter may mirror what eligible veterans who opt out of VTC feel about its rigorous requirements.

In their thematic analysis of participant perceptions of VTC personnel, Herzog et al. (2019) found that the VTC: “(1) was more personable than a traditional court experience; and (2) acting judge was a veteran who is transparent with his own issues (e.g., PTSD)” (p. 81). Participant perceptions of VTC personnel were overwhelmingly positive. In particular, the judge was reported by over 92% of participants to be the most

positive aspect of all the court actors (Herzog et al., 2019). The judge's transparency regarding his own struggle with PTSD garnered respect from participants who could identify with the judge and felt that the judge understood their troubles. Based on this information from respondents, and consistent with the findings of other studies (Ahlin & Douds, 2016), it is apparent that a sense of brotherhood among service members is important to them. Therefore, the camaraderie that VTC personnel have fostered with their participants should be highlighted when eligible veteran defendants are recruited into the program since military camaraderie is precisely what makes VTC unique from other courts (Baldwin & Rukus, 2015). Knowing that a mutual understanding exists between veteran offenders and VTC personnel may encourage greater participation.

For the RQ regarding participant perceptions of the connection between military service and their own criminal behavior, the themes identified were: "(1) there was no apparent connection; (2) service-related emotional/physical trauma led to substance abuse that then led to crime; and (3) that the military trains people to seek danger" (p. 81). Importantly, 100% of respondents reported misuse of alcohol or drugs and nearly 77% of respondents cited a direct or indirect link between their service and criminal behavior (Herzog et al., 2019). Most respondents also reported experiencing a negative mood state that was directly related to their service, particularly trauma of a physical or emotional nature (Herzog et al., 2019). These perceptions are consistent with GST and significant in that they illustrate how veterans reconcile their own offending with their military status. Since most respondents believed in a military-crime connection, it is possible that nonparticipants feel the same way. If that supposition is true, anger or

resentment toward the military could also be a possible explanation for veteran defendants refusing the help of VTC. In response to that presumed concern, VTCs may increase participation by acknowledging the toll that military life has taken on soldiers and make known to program recruits the beneficial services and resources available to justice-involved veterans, through the VTC, that can help to undo the damage caused by their military experiences. Veterans eligible to participate should be made aware of the vision, mission statement, and goals of the VTC so that their court processing decision is well-informed.

In an earlier study by Gallagher et al. (2017) investigating military veteran experiences in VTC, the RQ was as follows:

How do participants of a VTC view the program, in regards to the most helpful aspects that support them in graduating from the program and how the program could be more helpful in supporting them in graduating from the program? (p. 489)

Conducted in 2015, study participants were recruited from a VTC in the Midwest. VTC participants were invited by the researchers to participate in a survey, which included demographic information and two open-ended questions. Guided by phenomenology, narrative analysis was used to analyze responses and identify themes. To increase validity, observer triangulation and peer debriefing was used to address preconceptions and objectivity concerns (Gallagher et al., 2017). Fifteen participants, all male, completed surveys. The majority of respondents were White (53%), followed by 40% African American, and 7% Native American (Gallagher et al., 2017). Their tenure in the program

ranged from 4 to 19 months. Over 50% had combat experience. Participant age ranged from 27 to 69 years old (Gallagher et al., 2017). Data analysis revealed three themes consistently shared by the respondents that were generally favorable of the VTC and critical of the VA.

Compassion coupled with accountability was one theme that emerged from the data (Gallagher et al., 2017). This theme captures respondents' sentiments that court personnel were helpful and caring but would hold them accountable and issue sanctions when necessary. Respondents also noted the early part of the program was the most challenging as they had to adjust to all of the new rules, abstain from drugs and alcohol, and disassociate from substance-using peers. Despite these challenges, respondents overwhelmingly found VTC personnel to be supportive and concerned with their rehabilitation (Gallagher et al., 2017). Two respondents contradicted the theme of compassion with accountability. One respondent claimed the program was not helpful and he would not graduate because the court expected too much of participants. The second respondent stated that no one in the court understood the challenges veterans face (Gallagher et al., 2017). Both of these negative views are consistent with what Herzog et al. (2019) found in their study. While 92% of participants reported a favorable view of the VTC overall, only one respondent did not view the court positively, stating that he was frustrated with program requirements (Herzog et al., 2019). Based on these two studies, program rigor appears to be the main source of dissatisfaction among VTC participants. The other concern raised by a respondent in the study by Gallagher et al. (2017) is that veterans are misunderstood. Although this was a minority opinion, it does

corroborate the findings of Herzog et al. where the judge was reported by over 92% of participants to be the most positive aspect of all the court actors because of his transparency regarding his own struggle with PTSD. Feeling understood by court personnel caused participants to view the court favorably and, conversely, not feeling understood caused a respondent to view the court negatively. The negative feedback expressed by VTC participants regarding program difficulty and feeling misunderstood may also reflect how veteran defendants who opt out of VTC perceive the court and its actors.

Another theme to emerge from the data was mental illness not defining the veteran (Gallagher et al., 2017). Of the study's 15 respondents, 100% reported a mental health diagnosis and SUD (Gallagher et al., 2017). Respondents stated they were often viewed foremost by their mental illness, but that VTC staff saw beyond their diagnoses and made real efforts to get to know them as individuals. One respondent contradicted this theme, stating he did not like to be told he had PTSD because it made him feel judged and labeled (Gallagher et al., 2017). The majority positive comments and one negative comment both reinforce the conclusion that veteran offenders need to feel seen, understood, and treated as individuals.

The third theme to emerge from analysis of survey responses was dissatisfaction with the VA (Gallagher et al., 2017). When asked how the VTC could be more helpful, most respondents expressed a number of concerns related to the VA. The main concerns were over-prescription of psychiatric drugs and not receiving enough counseling. Respondents felt the VA only wanted to offer them pills but was not as interested in



providing counseling and therapy for PTSD and depression. Respondents also noted their troubles had a negative impact on their families and they would like family members to be involved in treatment with them, such as marriage counseling and family therapy. Three comments contradicted this sentiment by speaking favorably of the VA, including its doctors and social workers. The theme of dissatisfaction with the VA, however, is not new in military rhetoric and VTCs may also be viewed negatively by their association with the agency. If so, electing to opt out of treatment may be more closely related to unfavorable perceptions of the VA than the VTC itself.

The two studies reviewed above were selected for their contribution to the body of knowledge on veteran offenders and their perceptions of VTCs as participants. What participants think about veterans' court, particularly what they do not like about it, is the closest the literature gets to the factors responsible for non-participation. Only one study was found that included the opt-out rationale of veteran defendants (Baldwin, 2017), but it cannot be relied upon to answer the RQ of the present study as it utilized now outdated data from earlier research and only included the perspectives of VTC administrators. Despite these deficiencies, Baldwin's study utilizing a nationwide survey of VTCs is included in this research to provide the most complete repertoire of the factors justice-involved veterans consider when making their court processing decision. Baldwin's study is of especial significance to the topic of this research because it identified several veteran offender reasons for non-participation that were not accounted for by other studies on the subject.

Utilizing data from the first nationwide survey of VTCs in 2012, Baldwin (2017) explored VTC participant characteristics, the perceived relationship between military service and crime, and the program-related challenges participants face. Surveys were disseminated to 114 VTCs in 32 states and 79 surveys were completed by VTC coordinators, administrators, or directors (Baldwin, 2017). Of the 69 VTCs that reported eligible participants had opted out of their programs, over 37% stated the reason for opt-out was the rigor of the program (Baldwin, 2017). This finding is consistent with more recent studies of VTC participants who also expressed concerns that the program was too difficult (Gallagher et al., 2017; Herzog et al., 2019). Nearly 16% of respondents reported the reason for opting out was the recruit did not want treatment or they wanted to continue using drugs or alcohol (Baldwin, 2017). That reason corroborates the supposition presented earlier that readiness to change is likely a factor in a justice-involved veteran's decision to accept or reject treatment.

While a veteran's RTC is outside of a VTC administrator's control, there are concerns that can be addressed by administration to increase participation in their program. For example, nearly 9% of respondents reported veterans opted out because they believed they could get a better deal in criminal court (Baldwin, 2017). Other concerns included residency and transportation issues, previous negative experiences with the VA, and wanting a trial or not wanting to plead guilty (Baldwin, 2017). These are areas of concern that VTC program coordinators may be in a position to address to attract more participants. Over 27% of respondents stated they did not know the reason why program recruits opted out of VTC (Baldwin, 2017). This finding is significant

because changes to program policies and requirements for the purpose of increasing participation cannot be made if VTC administrators do not evaluate their program and solicit feedback from veterans who decline their services.

The three studies reviewed thus far detail perceptions of VTCs by program participants and the reasons why veteran defendants opt out according to VTC administrators. Results from the studies of both Herzog et al. (2019) and Gallagher et al. (2017) suggest veteran offenders are generally satisfied with their VTC experience. To summarize, respondents attributed their favorable perceptions of the court to its provision of a second chance, social support, a stabilizing force, a viable alternative to drug court, a mechanism to advocate for securing various resources, a veteran judge, a more personable experience than criminal court, compassion with accountability, and the treatment of veterans as individuals rather than their mental health diagnoses. Negative perceptions of VTCs held by participants were based on their experiences with the VA, particularly over-prescription of medications and insufficient counseling, feeling that no one understood veterans, and rigorous program requirements. For veterans who opted out of treatment, VTC coordinators reported the reasons were program rigor, not wanting treatment, believing they could get a better deal in criminal court, transportation and residency issues, negative experiences with the VA, wanting a trial, and not wanting to plead guilty.

In addition to the factors influencing treatment decisions identified in the aforementioned studies, some researchers attribute VTC participation to a sense of veteran identity achieved through military socialization. How central a person's veteran

identity is will influence the services they use (Adams et al., 2019). In a study by Adams et al. (2019), findings suggested the more central veteran identity was, the more likely the person was to use VA services. Therefore, a veteran's refusal to participate in VTC may be due to their low sense of veteran identity. Veterans with central veteran identity were also less likely to report suicide ideation, yet more likely to misuse alcohol (Adams et al., 2019). A more recent study by Ahlin and Douds (2020) explored this concept further, identifying how veteran identity affects treatment decisions.

Ahlin and Douds (2020) examined the role of veteran identity in the decision to participate in a VTC rather than choose traditional court processing. The researchers used thematic analysis to analyze the data collected from semistructured interviews of VTC mentees and mentors in one urban Pennsylvania VTC. Citing identity theory, the authors hypothesized that a veteran's decision to participate or opt out of VTC was linked to their role-based identity. Four dominant themes emerged from responses regarding participant decision-making. The four factors veterans considered were: "(1) personal shame, (2) concerns about increased punitiveness by law enforcement, (3) perceived stigmatization/retaliation by society, and (4) fear of dishonoring their military branch of service" (p. 325). These findings are important because they explain exactly what veterans contemplate while considering VTC participation. This information can be used in the development of strategies to address veteran concerns, minimize their impact, and increase treatment participation.

The studies reviewed in this section on veterans' perceptions of VTC were selected to offer the most comprehensive catalog of treatment decision-making factors

available from current literature and for their timeliness, chosen research method, and relevance to the RQ of the present study. All of the studies reviewed utilized a qualitative approach. Qualitative inquiry yields the most meaningful responses to RQs that are exploratory in nature. The highlighted studies were all based on exploratory RQs and were, therefore, properly aligned with a qualitative method. Data was obtained from either semistructured interviews or open-ended surveys of VTC participants or coordinators and analyzed using thematic analysis techniques, consistent with the scope of the present study.

The studies selected for review are relevant to this research because they each provide specific information as to how veterans perceive VTC and their reservations about accepting treatment, which is as close as the literature gets to explaining the reasons why justice-involved veterans opt out of VTC. All of the studies reported common limitations, including small sample sizes (Ahlin & Douds, 2020; Herzog et al., 2019), generalizability (Ahlin & Douds, 2020; Baldwin, 2017; Gallagher et al., 2017; Herzog et al., 2019), social desirability bias (Gallagher et al., 2017; Herzog et al., 2019), and a lack of gender and/or racial diversity among respondents (Gallagher et al., 2017). Peer debriefing and triangulation were cited as measures taken to increase validity. What remains to be studied is the modern rationale for veteran defendants who refuse participation in VTC according to VTC coordinators and criminal attorneys. As predicted by Holliday et al. (2021), obstacles presented by COVID-19 are presumed to have an undue effect on veterans already suffering from the strains of mental illness and substance abuse. Presumably, the barriers to treatment have been- and will continue to

be- compounded by the pandemic. Mental illness, substance abuse, suicide, and homelessness are key issues for veterans and constitute nationwide social and public health crises. VTCs are in the unique position to be a positive force for social change by treating veterans for the devastating effects of war-related trauma, and setting them on the path toward prosocial behavior. To achieve social change in this area, ongoing research such as the present study is necessary to continue servicing the evolving needs of justice-involved veterans.

### **Summary and Conclusions**

VTCs have been created to empower veterans to confront the mental health conditions, substance abuse, and anger that have contributed to their offending. Trauma characteristic of the military experience elicits negative emotions that lead to maladaptive and antisocial behaviors, as posited by GST. Consequently, VTCs offer treatment to address the underlying issues that contribute to criminality for the purpose of preventing recidivism. Although recidivism rates for VTC program graduates are significantly lower than the rest of the offender population (Erickson, 2016; Frederick, 2014), stringent eligibility requirements prevent some veteran defendants from receiving the benefits of VTC. Furthermore, participation is voluntary and the reasons for opting out remain unclear. The current literature on perceptions of the court suggest that participants are overwhelmingly satisfied with their VTC experiences. For those who did not report positively, programming was described as too rigorous and past negative experiences with the VA colored their perceptions of VTC. While these sentiments may also reflect the views of veteran defendants who opt out of a VTC program, only one study was

found to include that population. The lack of non-participant perspective in empirical studies on the topic of VTC participation attests to the difficulty of accessing this population, resulting in a gap in the literature regarding the reason why veteran defendants refuse participation in VTC. The present study addressed this gap and extended the knowledge in the discipline by surveying VTC coordinators, prosecuting attorneys, and public defenders to glean from their professional knowledge and experience what reasons veteran defendants give for refusing participation in these programs. Qualitative methods, including open-ended surveys and thematic analysis, were employed to explore and analyze the reasons why justice-involved veterans opt out of VTC, filling a gap in knowledge. The research plan for sampling, data collection, and analysis are detailed in Chapter 3.

## Chapter 3: Research Method

### Introduction

VTCs continue to grow in number as the latest development in the problem-solving court movement. VTCs were created to address what appeared to be an inordinate number of military veterans involved in the criminal justice system (Baldwin & Brooke, 2019). Supported by subsequent research on the overrepresentation of veterans in U.S. jails and prisons (U.S. Department of Justice, 2015) and a link between military service and crime (Bennett et al., 2018; Lennon, 2020; Traynham et al., 2019), VTCs rapidly proliferated to better service the needs of veteran offenders (Baldwin & Brooke, 2019). The VTC model incorporates mental health and substance abuse treatment, peer accountability, and community supervision to address the underlying issues empirically known to contribute to antisocial behavior. Despite favorable study results on the efficacy of VTCs, as well as overwhelmingly positive feedback from program participants, participation is voluntary, and some justice-involved veterans elect to opt out of VTC. There are a number of studies on VTC participants (Ahlin & Douds, 2016; Gallagher et al., 2017; Herzog et al., 2019), but a gap in the literature is the rationale of veteran defendants who refused to participate in VTC according to a broader population of VTC actors. The purpose of this study was to discover the reasons why justice-involved veterans decline participation in VTC programs.

This study addressed the knowledge gap regarding eligible candidates' refusal to participate in VTC by surveying VTC coordinators, criminal defense attorneys, and prosecuting attorneys in the state of Georgia. Qualitative inquiry was used to explore



what these court actors know, based on their knowledge and experience, about veteran defendant decision making when considering their court processing options. The logic for participant selection is detailed in the Methodology section of this chapter. Also explained in this chapter is the research design of the present study and the rationale for the design chosen. The researcher's role is examined for the purpose of disclosing any biases or conflicts of interest. Issues of trustworthiness are investigated to establish the credibility of the methods and data of this study, as well as any conclusions that may be drawn from it.

### **Research Design and Rationale**

The central phenomenon of the present study is nonparticipation in VTC, particularly the reasons why veteran defendants decline to participate in VTC. Knowledge of factors influencing the court processing decision for veterans who opted out of VTC constitutes a gap in the literature as identified by Ahlin and Douds (2020) in their study on VTC participation. To fill this gap, the following RQ was developed: What factors do veterans' treatment court actors identify as the reasons why veteran defendants decline participation in VTC programs? In the phenomenological tradition, the RQ attempts to identify the shared experiences of multiple people experiencing the same phenomenon. This approach is consistent with the study of veteran participant experiences in VTC by Gallagher et al. (2017) presented in Chapter 2.

For the present study, VTC coordinators and attorneys were asked what they perceived the reasons to be as to why eligible veteran defendants opt out of the VTC programs in their respective districts. Despite the anticipated heterogeneity of the

participants individually, all VTC coordinators and attorneys were reasonably expected to experience the same phenomenon of veterans refusing to participate in VTC programs and were, therefore, appropriate participants for this study. With the understanding that presumably not all coordinators and criminal attorneys collect information from VTC nonparticipants, their conclusions regarding the rationale of veteran defendants may be speculative or generalized. For that reason, I sought only what coordinators and attorneys have experienced and did not attempt to make any claims beyond experiential knowledge as court administrators and criminal attorneys with experience working with veteran defendants. Multiple individual accounts of the same phenomenon yield a variety of perspectives on a broad spectrum of both shared and unique experiences. A record of the vastness of such experiences provides an accounting of all known variables and is necessary for a comprehensive understanding of the phenomenon. For that reason, a phenomenological approach was the most appropriate research tradition for exploring the reasons why veteran defendants decline VTC participation according to multiple individuals who are on equal footing to know.

### **Role of the Researcher**

My role was outsider researcher as I had no previous experience with the phenomenon explored in this study, nor did I have any relationship to the prospective participants (see Barrett et al., 2020). My role as an outsider researcher was to create the survey instrument used to collect data and to analyze said data. As the instrument for the present study was a computer-based, self-administered survey, I did not serve as observer, participant, or observer-participant. I did not have a relationship, professional

or personal, with any of the VTC coordinators or attorneys who were solicited for participation in this study. I declare no conflicts of interest, power differentials, personal or professional biases, or any other ethical issue that would have precluded me from conducting impartial research on this subject and with the intended population. However, to avoid steering data in any direction, survey questions were open ended. Open-ended questions avoid leading the participant to an anticipated response, thereby prejudicing the data (Chenail, 2011). To further mitigate researcher bias, I sampled survey questions from existing studies on the subject and modified them to address the role of the survey participant (VTC coordinator, prosecuting attorney, or public defender). Only questions that served the RQ were included in the survey instrument to avoid increasing the potential for researcher-biased questioning. I did not offer or provide incentives to participants.

### **Methodology**

I designed this study to discover the reasons why justice-involved veterans decline to participate in VTC. Considering the difficulty of accessing the veteran defendant population for research purposes, and to protect a potentially vulnerable population, veteran defendants were excluded from this study. VTC coordinators were the primary population for study because they are knowledgeable of eligible candidates and are likely to recognize the issues preventing their participation. The underlying logic of selecting VTC coordinators as participants for this study is that the VTC coordinator perspective provides a more holistic representation of veteran defendant rationale because it does not rely upon individual experiences but is informed by the coordinator's

interactions with numerous veteran defendants and the myriad reasons to opt out of VTC they represent.

I surveyed defense and prosecuting attorneys with experience working with veteran offenders as a complementary source to corroborate data collected from VTC administrators. Insight from defense and prosecuting attorneys provides a valuable perspective because they work directly with veteran defendants at the critical time a court processing decision is made. Because decision-making factors may vary across jurisdictions, I solicited multiple agencies within the state of Georgia for survey participation. I selected Georgia out of convenience and because the state contains enough VTCs to produce valuable data.

The target groups of interest were VTC coordinators, public defenders, and prosecuting attorneys, to include district attorneys, assistant district attorneys, and solicitors. The VTC coordinator criteria for inclusion were current employment with a VTC and the title of coordinator or director. The CACJ of Georgia maintains a list of active VTC coordinators in the state of Georgia on their website, <https://cacj.georgia.gov/>. At the time of data collection, there were 27 coordinators' names and contact information listed on the CACJ website. I contacted all 27 coordinators via email and invited each to participate in the study. I accessed contact information for the attorneys solicited for participation from the public defender, district attorney, and solicitor's office websites for each county court that has a VTC in its jurisdiction, as identified by the CACJ of Georgia website.

Due to the specific nature of the phenomenon under study, a small sample was expected. In the study by Herzog et al. (2019) reviewed in Chapter 2, 13 justice-involved veterans participated, successfully producing five dominant themes from the sample. Guest et al. (2006) placed data saturation at 12 interviews. Although the data collection method was a survey rather than an interview, the questions were the same as those that would be used for semistructured interviews. The 12 to 13 range appears to be sufficient for qualitative studies and appropriate for the phenomenon of interest. The sample size was expected to vary, however, dependent upon what information was obtained during data analysis. If no new data were found after 12 completed surveys, for example, theoretical saturation could have already been reached, and adding more surveys may not have contributed significantly to the emerging themes. Although interviews are traditionally believed to result in more detailed responses, self-administered, computer-based surveys were the only method employed, complying with social distancing guidelines and allowing participants to engage with the questionnaire at their convenience within the sampling timeline.

I sent study solicitation emails to VTC coordinators, prosecuting attorneys, and public defense attorneys. The email contained the purpose of the study, an invitation to participate, and a link to the survey. I created three electronic survey instruments for each of the three participant groups using SurveyMonkey, which is an internet-based platform for survey development (see Appendix). The first question contained the informed consent statement, followed by court demographic questions adapted from Luna and Redlich's (2021) national survey of VTC personnel. The court demographic questions

included in Luna and Redlich's survey were appropriate for the present study because they were posed to the same population (VTC coordinators) and were thorough enough to assist in transferability decisions. The only modification to Luna and Redlich's demographics questionnaire I made was to remove the question regarding court location, as the survey was intended to be as anonymous as possible. Demographic questions were for comparison analysis only and did not include any identifying information.

I created substantive questions by sampling relevant survey questions from instruments used in related peer-reviewed studies (see Ahlin & Douds, 2020; Baldwin, 2017; Herzog et al., 2019). I adapted questions from those studies, representative of the theories from which they were developed, to address coordinators and attorneys rather than defendants. I also created additional questions that allowed for alternative explanations of veteran defendant rationale, such as those factors accounted for by GST. Such questions asked coordinators and attorneys, based on their knowledge and experience, why eligible veterans declined VTC participation, what reasons eligible veteran defendants gave for declining participation, and what changes to VTC programs they believed would result in more favorable outcomes for justice-involved veterans. The surveys concluded by thanking the participant for their time and contributions to the field.

The instrument was reviewed by a field expert (VTC coordinator) to ensure content validity. The survey was a sufficient data collection instrument for this study because it contained open-ended questions to allow for thorough, descriptive responses. Considering the RQ was provided to VTC actors about veteran defendants and not to veteran defendants themselves, interviews were not necessary to capture any nonverbal or

emotional communication that may have been valuable information coming from veteran participants but were not likely or necessary with the VTC coordinator and attorney populations. As a contingency plan in the instance of low survey participation, the sample would have been expanded to include VTCs in other demographically comparable southeastern states.

Data collection occurred during a 7-week period to allow ample time for introductions, questions, and any necessary follow-ups between myself and the survey participants. One week after the initial email containing the survey link was sent to prospective participants, I sent a reminder email every week to encourage participation. Completed survey data were maintained in my SurveyMonkey account, which I transferred into a spreadsheet for organizational purposes. I updated the spreadsheet as frequently as surveys were completed. In the event of low participation, a second wave of data collection was planned to occur after the initial 7-week period and would have included the same target population of a comparable state. I would have made contact with those prospective participants using the same methods described to access the Georgia sample.

I manually coded survey responses using open, axial, and selective coding. Key takeaways from the data began to emerge during the coding process. Once the surveys had been coded and organized in a spreadsheet, themes common across the surveys became apparent. Thematic analysis requires reading each survey multiple times to look for main points, repeated keywords, and phrases that express the participant's perspective. Once all the codes from the responses had been identified and text from the

surveys labeled accordingly (open coding), I combined the codes into broader categories (axial coding), and further grouped the categories into overarching themes (selective coding; see Maxfield & Babbie, 2018). I then entered this information into a spreadsheet for organization and reference purposes. Comparison of these themes allowed me to ascertain the most prevalent ideas, by which inferences were made and conclusions drawn.

### **Issues of Trustworthiness**

I implemented two methods to enhance transferability of the present study. Although offender motivations are highly variable, it can be assumed that jurisdictions with comparable demographics are likely to report similar experiences. With that in mind, demographic data for the agency represented by each survey participant were documented to furnish readers with sufficient information to make an informed transferability determination. The target populations for my dissertation study were VTC coordinators and criminal attorneys. The perspective of a coordinator or attorney is an aggregate of what is most typical of their respective court as opposed to the singular experience of individual veterans. Therefore, the data obtained from 10 VTC coordinators, for example, is likely a more accurate representation of the phenomenon generally than the data obtained from 10 defendants. The target population selected is the strongest case for the transferability of this study's findings because it included coordinators from multiple jurisdictions rather than participants from one court program. For triangulation purposes, I surveyed defense and prosecuting attorneys experienced with both justice-involved veterans and VTCs to discover their perceptions of veteran



defendant treatment decision-making. Triangulation enhances the credibility of a study by corroborating data across sources (Shenton, 2004).

Once the proposal for the present study was approved by my dissertation committee, I developed the survey instruments using existing literature of studies on the subject of VTC participation. Adapting the instrumentation tools of related studies to the target populations of the present study and consulting with a professional in the field (VTC coordinator) were the steps I took to ensure credibility of the instruments. My dissertation committee served as external auditors to make sure that my research was dependable. Having a researcher who was not involved with my study examine my methods, analysis, and conclusions was critical to the dependability of my study. Not only did input and confirmation from other researchers help to build a stronger case for the trustworthiness of my research, but the ability to articulate and justify the decisions made during the research process ensured confirmability. Therefore, I maintained a reflexivity journal to remain focused and deliberate about the choices I made while conducting my study. Reflexive journaling is an effective way to promote the trustworthiness of qualitative research and is a practice I exercised for the purpose of enhancing the overall quality of my study (see Barrett et al., 2020). Additionally, I selected a peer debrief partner from my doctoral studies cohort to analyze and code responses. Discussion with a qualified peer of the most appropriate codes for analysis helped to ensure intercoder reliability.

All three surveys began with an informed consent statement to which the participant selected “I agree” before continuing to the substantive questions. Selection of

“I do not agree” prompted an exit screen and terminated the survey. Survey data were anonymous and confidential. Only the peer debrief partner had access to the printed data and no one other than the researcher had access to the SurveyMonkey or email accounts. No identifying information was requested of the respondents. I terminated the SurveyMonkey account upon study completion and any survey-related data stored in my password-protected drive will be destroyed five years after study publication. Regarding recruitment, I only solicited VTC coordinators and attorneys with publicly displayed contact information for study participation. I anticipated no ethical concerns or participant risks.

### **Summary**

I used qualitative methods in this study to explore what VTC coordinators, defense attorneys, and prosecuting attorneys perceive to be the reasons why veteran defendants opt out of VTC programs. Recruited from the 27 active VTCs in the state of Georgia, I invited respondents to participate in an electronic, self-administered survey containing demographic and open-ended, substantive questions regarding VTC nonparticipants. With GST as the theoretical foundation, I designed the survey instrument to account for a wide variety of explanations as to why justice-involved veterans opt out of VTC, which is a departure from contemporary studies on VTC participation that base questioning primarily on identity theories. To corroborate data collected from VTC coordinators, I also invited attorneys from public defender, district attorney, and solicitor offices of the same jurisdictions to participate in the survey with similar substantive questions. I used theming to analyze data collected from the three participant groups. A

peer debrief partner assisted with coding to enhance reliability and my dissertation committee served as external auditors to ensure dependability of the present study.

The data collected from this study provided important information regarding the obstacles that prevent veteran defendants from participating in VTC programs. Those results will be presented in Chapter 4. As studies continue to report lower recidivism and improved outcomes for VTC graduates compared to offenders in traditional courts, practitioners will need to know what the barriers to participation are so that they can be addressed to increase participation. Reduced recidivism among a significant segment of the offender population is only one way that VTCs are positioned to contribute to positive social change. Maximizing participation in VTC also has the potential to reduce substance misuse, homelessness, and suicide among veterans, improving their lives, families, and communities.

## Chapter 4: Results

### Introduction

VTCs were created to address the specific needs of veteran defendants who suffer from PTSD, substance dependency, and suicide ideation stemming from their military service. Consistent with GST, the stressors of military service can lead to negative emotions, such as anger, which have been linked to maladaptive coping strategies and criminality among veterans. VTCs are designed to address the unique stressors of military life and its aftermath, as well as the underlying causes of veteran criminality by providing mental health counseling, substance abuse treatment, and peer mentorship. The problem is that participation in VTC is voluntary; therefore, not all eligible veteran defendants receive the benefits of such programs. The purpose of this study was to examine the reasons why veteran defendants choose to opt out of VTC by posing the following RQ: What factors do veterans' treatment court actors identify as the reasons why veteran defendants decline participation in VTC programs?

I designed a qualitative study to answer the RQ, and the results are presented in this chapter. The study setting and participant demographics are discussed first, followed by a detailed description of data collection and analysis procedures. I explain the measures employed to enhance the credibility, dependability, confirmability, and transferability of the study as evidence of trustworthiness. Finally, I discuss in this chapter the results of the data obtained by surveying VTC coordinators, public defenders, and prosecuting attorneys on the reasons why veteran defendants opt out of VTC.

### Setting

VTC coordinators are responsible for the administration of their court as either a separate docket or as a track on another accountability court docket, such as drug court. VTCs can serve a single county or a circuit consisting of multiple counties. According to the CACJ, there are 27 VTC coordinators in the state of Georgia. I invited all 27 coordinators to participate in the survey. Additionally, I obtained contact information for the district attorneys, assistant district attorneys, public defenders, and solicitors of the jurisdictions represented by the 27 VTCs from county websites to solicit their participation in the survey.

A total of 33 surveys were completed by respondents, evenly divided among the three participant groups (11 VTC coordinators, 11 prosecuting attorneys, 11 public defense attorneys). Of the 33 survey participants, 88% reported that the VTC in their jurisdiction operated as a separate court, 6% indicated that their VTC operated as a track within drug court, 3% reported that their VTC was a track within a mental health court, and 3% indicated that their VTC operated as a track within Driving Under the Influence (DUI) court (see Table 1). Most respondents (67%) reported that the VTC in their jurisdiction served one county only, 27% indicated that the VTC in their jurisdiction was part of a multicounty circuit, and 6% were unsure of their VTC's jurisdictional limits. When asked about the geographic area of the VTC in their jurisdiction, 49% reported that their VTC was best classified as an urban area, 42% claimed mixed urban and rural, 6% indicated rural, and 3% of respondents were unsure.

**Table 1***Characteristics of Respondent Courts*

Characteristic	<i>n</i>	%
Docket type		
Separate court	29	88
Track within drug court	2	6
Track within mental health court	1	3
Track within DUI court	1	3
Jurisdiction		
Single county	22	67
Multi-county circuit	9	27
Unknown/Other	2	6
Geographic area		
Urban	16	49
Rural	2	6
Mixed urban and rural	14	42
Unknown	1	3
Military experience		
VTC coordinator	2	18
Primary or secondary judge of VTC	5	45

Survey questions asked VTC coordinators about their own military experience as well as the military experience of their VTC judge. Of the 11 respondents, 9% indicated that they had military experience, 9% indicated that they had both military and combat experience, and 82% of VTC coordinators reported no personal military experience. When asked about the military experience of their court's judge(s), 55% of coordinators reported that the judge of their VTC did not have military experience, 18% reported that the judge did have military experience, and 27% reported that the primary judge did not have military experience but the secondary judge did have personal military experience. No further identifying information regarding court location or characteristics was collected in the survey for the purpose of maintaining respondent court anonymity.

No significant organizational conditions influencing participants at the time of study were reported by respondents. It is necessary to consider, however, that the lingering social restrictions and, presumably, personnel and budgetary challenges presented by the COVID-19 pandemic may have had some impact on participants and their work, thereby influencing their experience at the time of data collection. The extent of such impact is difficult to estimate at this time, yet it is reasonable to conclude the practical operations of VTCs have adapted in some ways to address pandemic-related concerns. The psychological toll of COVID-19 on study participants is beyond the scope of this study although it is worthwhile to note the possibility this may be a factor influencing the study setting.

### **Demographics**

The court demographic data germane to the present study included program eligibility requirements and the offense types accepted by the VTC. All survey participant groups were asked to indicate the eligibility requirements of the VTC in their jurisdiction (see Table 2). Respondents were provided with the following list of common requirements and prompted to select all that applied to their court: honorable discharge, combat experience, a nexus between current charge and military service, no prior violent convictions, veteran had to be in prior treatment, and veteran could not be in prior treatment. The survey included a text box for respondents to list any additional eligibility requirements of the VTC in their respective jurisdictions. Of the 33 survey respondents, 36% reported that honorable discharge was required to participate in their VTC program. In the text box provided for additional requirements not listed among the response

options, four respondents reported an “other than honorable” discharge was also acceptable, yet dishonorable discharges were not eligible for participation in their program, and three respondents indicated that all discharge types were accepted by their VTC.

**Table 2**

*Eligibility Requirements of Respondent Courts*

Eligibility requirement	<i>n</i>	%
Honorable discharge	12	36
Combat experience	8	24
A nexus between current charge and military service	9	27
No prior violent convictions	8	24
Veteran had to be in prior treatment	0	0
Veteran could not be in prior treatment	0	0
Unknown	1	3

*Note.* Eligibility requirements are not mutually exclusive.

Combat experience as a requirement of VTC participation was reported by 24% of respondents. A nexus between current criminal charge and military service was reported by 27% of study participants. No prior violent convictions was an eligibility requirement reported by 24% of respondents. One participant indicated that domestic violence cases were disqualified due to the lack of a domestic violence intervention in their program. A prior treatment requirement was not reported to be a participation



requirement by any of the respondents. Only one participant (3%) was unaware of the eligibility requirements of their VTC program.

When asked about offense types, 39% of respondents reported that their VTC accepted all misdemeanor offenses, and 27% reported that only some misdemeanors were acceptable (see Table 3). Some felonies were eligible for VTC according to 76% of respondents. One respondent (3%) indicated that all felonies were accepted by their VTC. Thirty-three percent of respondents selected “other” and elaborated on the offense exceptions of their program, including homicide, sexual assault, and kidnapping. Respondents commonly indicated that their court accepted a combination of misdemeanors and felonies, and that some violent offenses were permissible depending on the circumstances of each case.

**Table 3**

*Offense Types Accepted by Respondent Courts*

Offense type accepted	<i>n</i>	%
Some misdemeanors	9	27
All misdemeanors	13	39
Some felonies	25	76
All felonies	1	3
Unknown	1	3
Other	11	33

*Note.* Offense types accepted are not mutually exclusive.

### **Data Collection**

I designed this study to discover the reasons why veteran defendants decline to participate in VTC. To protect a potentially vulnerable population, I excluded veteran offenders from this study. I selected VTC coordinators as the primary population because

they are reasonably expected to recognize the issues preventing participation in the program under their administration. I also surveyed defense and prosecuting attorneys with experience working with veteran defendants and VTCs as a complementary source to data collected from VTC administrators. Because eligibility requirements and other demographic characteristics of VTCs vary across jurisdictions, I solicited multiple public defender and district attorney offices within the state of Georgia for survey participation.

I created three surveys in SurveyMonkey, one for each participant group. The survey for VTC coordinators contained 14 questions (see Appendix). The surveys for prosecuting and defense attorneys each contained 13 questions. The surveys for each of the attorney participant groups were the same in content, but I adapted the wording to appropriately address each group. The only material differences between the VTC coordinator and attorney surveys were the additional questions for coordinators about their personal military experience and the military experience of their VTC's judge, and the question for attorneys asking if they had experience representing or prosecuting veteran defendants.

At the time of data collection, there were 27 VTC coordinators' names and contact information listed on the CACJ of Georgia website. I invited all 27 coordinators to participate in the study. To identify defense attorneys for participation in the survey, I researched the public defender websites of the counties/circuits represented by the 27 VTC coordinators. I found a total of 96 public defender names and obtained email addresses for each from either the public defender county/circuit website or by searching the attorney's name on the State Bar of Georgia website. The same method was

employed for locating prosecuting attorney contact information. I found a total of 48 district attorney, assistant district attorney, and solicitor names by researching the district attorney and solicitor's office websites for each of the counties/circuits represented by the 27 VTCs in Georgia. I stored the email addresses in a Google spreadsheet as a database for future dissemination of a summary of results.

To organize the email addresses by participant group, I created a contact group in my Walden student email account for each participant group. I sent each group a survey invitation email that included an introduction of myself, the study topic and purpose, approximate time needed to complete the survey, a link to the survey, and a QR code that could be scanned by cell phone to access the appropriate survey for the participant group. I sent the email to all participant groups once per week beginning February 15, 2022. Data collection spanned 7 weeks, beginning February 15, 2022 and concluding on April 5, 2022. Weekly data collection dates included February 15, February 22, March 1, March 8, March 17, March 24, March 29, and April 5, 2022. A total of 33 surveys were completed by respondents, 11 from each participant group.

Data were collected in SurveyMonkey, and I manually recorded the data in eight spreadsheets of one Excel file. The first spreadsheet contained VTC coordinator responses to the 14 survey questions using identifiers P1 to P11 to represent each of the 11 respondents to the first survey. The second spreadsheet contained prosecuting attorney responses to the 13 survey questions using identifiers P1 to P11 to represent each of the 11 respondents to the second survey. The third spreadsheet contained defense attorney responses to the 13 survey questions using identifiers P1 to P11 to represent each of the

11 respondents to the third survey. The fourth spreadsheet contained the collective responses of all 33 participants, including the codes identified in participant responses to each of the four exploratory, open-ended questions. The fifth spreadsheet contained the coding data from all responses to the following survey question, which was asked of all participant groups: What reasons have VTC-eligible veteran defendants offered as to why they do not wish to participate in VTC? The sixth spreadsheet contained the coding data from all responses to the following survey question, which was asked of all participant groups: In your professional opinion, what are the reasons why VTC-eligible veteran defendants opt out of participation in VTC? The seventh spreadsheet contained the coding data from all responses to the following survey question, which was asked of all participant groups: Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC? The eighth spreadsheet contained the coding data from all responses to the following survey question, which was asked of all participant groups: What changes to the VTC in your jurisdiction do you believe would result in increased participation?

Data collection did not deviate from the original plan presented in Chapter 3. I identified prospective participants from Georgian agencies by the proposed method of searching county/circuit district attorney, solicitor, and public defender websites, as well using the VTC coordinator contact list from the CACJ of Georgia website. I created three electronic surveys in SurveyMonkey and distributed links to each by email to the corresponding participant groups. I sent a reminder email to all prospective participants

each week for a period of 6 weeks following the initial survey invitation, for a total data collection duration of 7 weeks. Data were collected in SurveyMonkey, and I manually recorded the data in spreadsheets for thematic analysis and for the purpose of record retention. I did not encounter any unusual circumstances during the data collection process.

### **Data Analysis**

As surveys were completed by respondents in SurveyMonkey, I manually recorded responses in spreadsheet form. I recorded responses to demographic questions and copied responses to open-ended questions from SurveyMonkey and pasted them into the spreadsheet, organized by question. I used thematic analysis to analyze the qualitative data of all four open-ended questions. I manually coded survey responses using open, axial, and selective coding. Thematic analysis requires reading each survey multiple times to look for main points, repeated keywords, and phrases that expressed the participant's perspective. Once I had identified all the codes from the responses and labeled text from the surveys accordingly (open coding), I combined the codes into broader categories (axial coding), and further grouped the categories into overarching themes (selective coding; see Maxfield & Babbie, 2018).

Once all the codes from the responses had been identified and recorded, I grouped the codes into broader categories based on their relatedness. For example, I grouped the codes "too strict" and "too much work" found in responses under the category of program rigor. I grouped the codes "intensive housing options" and "do not live in circuit" found in responses to the same question under the category of residency requirements. I

combined the categories to form overarching themes. For example, I consolidated the categories of program rigor and residency requirements under the theme of program requirements. This process was followed for all responses to each of the four open-ended questions asked of all participant groups until I had attributed all codes to a category and all categories further attributed to a broader theme. No discrepant cases were present in this study.

### **Survey Question Regarding Conflicting Identities**

To account for the common conclusion found in existing literature on the subject of veteran defendants that identity theory plays a role in the decision to participate in VTC, survey questions asked participants specifically about their opinion regarding the conflicting identities of veteran and defendant. For the survey question, “Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC?”, the response options provided were no relationship, weak relationship, strong relationship, I don’t know, and other. Most respondents selected one of the response options without further elaborating on their selection; therefore, no meaningful themes were discovered from those responses. I did discover two themes, however, from the responses of those who indicated a strong relationship between a defendant’s conflict of identities and their decision to opt out of VTC.

The themes of veteran identity and veteran as ideal citizen emerged from the qualitative responses of participants who believe there is a strong relationship between veteran-defendant identity and the choice to decline participation in a VTC program. In

support of their selection that a strong relationship exists, one respondent wrote, “Some veterans do not consider themselves ‘true’ veterans once they get into a group where there are veterans who appear to have had more intense service assignments.” This response suggests that some veterans may not view themselves as real veterans when compared with other veterans whose military experiences were more extreme than theirs. If this assertion is true, defendants with a low sense of veteran identity may decide to opt out of VTC because they do not consider themselves to be true veterans. Conversely, defendants with a strong sense of veteran identity may choose to participate in VTC out of a sense of pride or believing they are worthy of the special designation afforded to them by the VTC. For example, one respondent wrote, “When in the recovery community, I find that Veterans often think they're above others in the recovery community and do not want to be categorized with civilians in recovery.” This response suggests that defendants with a strong sense of veteran identity may be compelled to participate in VTC due to their unwillingness to be associated with civilian defendants, which could be interpreted as veteran pride.

The second theme to emerge from the qualitative responses from participants reporting a strong relationship between the veteran-defendant conflict and its relationship to VTC participation is the concept of veteran as ideal citizen. This theme encapsulates the sentiment that reconciling a veteran identity with a criminal identity is difficult for veteran defendants to do. One respondent wrote, “Some veterans are typically prideful and struggle with distorted thinking due to perception of what a veteran stands for, it is nothing criminal but the ideal citizen. Anything adverse to law-abiding is frowned upon.”

The perception that some veteran defendants may have that a veteran is an ideal citizen could affect their willingness to participate in VTC. Veterans who see their criminal involvement as contrary to their concept of an ideal citizen may find it shameful to claim veteran status. The contradiction of veteran as ideal citizen and veteran as criminal may be too difficult for veteran defendants to overcome, prompting them to opt out of VTC.

### **Survey Question Regarding Reasons to Decline VTC**

With the assumption that factors beyond the explanation of identity theory are influential in a veteran defendant's VTC decision, I provided survey participants an opportunity to name additional influences affecting the VTC decision-making process. The following open-ended question was posed in the survey: What reasons have VTC-eligible veteran defendants offered as to why they do not wish to participate in VTC? Responses from 33 participants resulted in 79 total codes (see Table 4). I grouped these codes into 30 categories and further categorized them into five themes. Sample quotes in support of the codes created, as well as the frequency of their appearance, are detailed later in this chapter. The dominant themes to emerge from the qualitative data regarding the reasons veteran defendants opt out of VTC were program requirements, RTC, alternatives, perceptions of programming and leadership, and reasons unknown.



**Table 4***Inductive Coding of Survey Question Responses*

Code	Code	Category	Theme
Other less intensive programs	Won't help	Program length	Program requirements
	Don't know	Program rigor	
Other less intensive housing options	Program rigor	Program restrictions	Readiness to Change (RTC)
Restrictive program	Court appearances	Residency requirements	
Program requirements	Drug screening	Medication requirements	Alternatives
Don't want to change lifestyle	Program restrictions	Drug screening requirements	
Don't know	Program length	Felony conviction	Perceptions of programming & leadership
Don't know	Don't want guilty plea	Distrust of VA	
Too much work	Want a trial	Fight charges	Reasons unknown
Rather do their time	Want to fight charges	Want a trial	
Want to continue medication use	Don't know	Guilty plea	Reasons unknown
No place to live	No housing	Treatment	
Don't know	Residency requirements	Do time	Reasons unknown
Too much of a commitment	Nonuniform standard	Lifestyle change	
Not ready for treatment	Resources not given	Don't know	Reasons unknown
Don't live in circuit	"Zero defect" mentality	Military Experience	
Too strict	No military experience	"Zero defect" mentality	Reasons unknown
Too strict	Inability to identify	Resources not given	
Program length	Not guilty	Nonuniform standard	Reasons unknown
Drug screening requirements	Program too long	Traditional sentence	
Residency requirements	Distrust of VA	Employment interference	Reasons unknown
Probation	Treatment	Judge	
Employment interference	Program length	Not worth it	Reasons unknown
Treatment	Program restraints	Prefer probation	
Don't want felony conviction	Fight the charge	Pretrial diversion	Reasons unknown
Program is too strenuous	Program obligations	Lesser punishment	
Do not want treatment	Prefer traditional sentence	Better offer	Reasons unknown
Don't know	Employment interference	Won't help	
Judge	Program rigor	Court appearances	Reasons unknown
Not worth it	Lesser punishment	Other VA services	
Prefer probation	Pretrial diversion		Reasons unknown
Interferes with work	Don't know		
Program length	Don't know		Reasons unknown
Avoid treatment	Commitment		
Better deal	Treatment		Reasons unknown
Criminal record	Other VA services		
Don't know	Won't help		Reasons unknown
Probation	Don't want to plead		
Better offer			Reasons unknown
Treatment			
Program restrictions			Reasons unknown
Program length			

*Note.* All responses from 33 respondents to the survey question were coded, and all

codes, including duplicates, are listed in the table.

The theme of program requirements includes the following response categories: program length, program rigor, program restrictions, medication requirements, drug screening requirements, residency requirements, felony conviction, court appearances, employment interference, and guilty plea. The significant number of requirements and the sheer difficulty of completing VTC programs appear to influence the VTC decision-making process for eligible defendants. The theme of RTC includes treatment and lifestyle change. This theme is supported by earlier research and will be discussed in further detail in Chapter 5. The third theme to emerge from the qualitative data was alternatives and includes the following categories: lesser punishment, other VA services, pretrial diversion, better offer, fight charges, want a trial, do time, traditional sentence, and prefer probation. The fourth theme I found in the responses was perceptions of leadership and programming. I developed this theme from the following categories: distrust of VA, nonuniform standard, not worth it, resources not given, no military experience, won't help, inability to identify, judge, and "zero defect" mentality. I created these categories from the words and phrases written by respondents expressing the significance of veteran perceptions of VTC programming and VTC actors on their decision to opt out of VTC. The final theme was reasons unknown. This theme is of particular significance because it highlights the need for program evaluation by VTCs.

To allow VTC actors the opportunity to make a distinction between what they had been told by veteran defendants were the reasons for their decision to refuse participation in VTC and what they believed to be the actual reasons why eligible defendants opted

out, I posed the following question to respondents in the survey: In your professional opinion, what are the reasons why VTC-eligible veteran defendants opt out of participation in your VTC? I found the five themes from the question discussed previously in the responses to this question. A sixth theme, however, emerged from responses regarding the respondents' opinions as to what factors influenced the VTC participation decision. The theme lack of awareness refers to the codes and categories suggesting program candidates are not identified, or are identified too late, and that veteran defendants are not aware that such programs exist. The theme lack of awareness emerged from the qualitative responses of both defense and prosecuting attorneys but not from VTC coordinator responses. The additional perspective of attorneys with experience working with veteran defendants contributes to the knowledge on the subject by illuminating another barrier to participation not accounted for by existing research.

### **Survey Question Regarding Proposed Changes to VTC**

The VTC actors I surveyed for this study were offered the opportunity to provide their suggestions on how programming could be improved. Survey participants were asked the following open-ended question: What changes to your VTC do you believe would result in increased participation? Responses from 33 participants yielded 54 codes, which I grouped into 29 categories. I consolidated the categories into five themes, including expand eligibility, improve program/enhance benefits, raise awareness, reduce program intensity, and no changes. Sample quotes in support of the codes created, as well as the frequency of their appearance, are detailed later in this chapter.

I created the theme expand eligibility by combining the following categories supported by respondent words and phrases: evaluation process, non-VA eligibility, mental health, SUD not required, allow violent charges, accept low/at risk, include misdemeanors, allow gun charges, domestic violence (DV) intervention, and services for at-risk veterans. Proposals to expand eligibility address the issue that not enough veteran defendants qualify for VTC participation. This is a legitimate concern because, in addition to a lack of interest in participation due to program requirements, RTC, alternatives, perceptions of leadership and programming, and a lack of awareness, participation is even further limited by stringent eligibility requirements. The second theme recommending program improvement and enhancement of program benefits includes making the program more efficient, providing housing assistance, and increasing VJO contact. The decision to opt out of VTC may be influenced by the absence of benefits that would make participation in a lengthy and rigorous program worthwhile and more attractive than the alternatives.

The third theme to emerge from the qualitative responses from VTC actors when asked for their recommendations on how programs can be improved was raise awareness. This finding is expected considering respondents indicated a lack of awareness was responsible in part for veteran defendants not choosing VTC. A lack of awareness does not exactly speak to the decision to opt out but, rather, represents an additional category of nonparticipants-- those who simply do not know the program exists. A population of veteran defendants is not eligible to participate for any number of reasons related to program eligibility requirements and another population of veteran defendants chooses

not to participate based primarily on the four reasons discovered by survey responses (program requirements, RTC, alternatives, perceptions of programming and leadership). Raising awareness among prosecuting attorneys, defense attorneys, and veteran defendants of the program and its benefits will at least afford eligible veterans the opportunity make an informed court processing decision.

The fourth theme I discovered was the recommendation that VTCs reduce program intensity. The programmatic aspects included within this theme are program length, outpatient services, and program requirements. As reported earlier, the length and rigor of programming, including outpatient services, and number of eligibility requirements characteristic of VTCs are barriers to participation. Reducing the intensity of one or more aspects of programming as survey respondents suggested may result in increased participation, which would ultimately serve the goal of treating all veteran defendants ready to accept the help of VTC. The final theme was no changes with respondents reporting their program received sufficient resources and was successful.

### **Evidence of Trustworthiness**

There are numerous strategies that can be employed to ensure qualitative research meets the standard of rigor characteristic of quantitative data. The concept of trustworthiness in qualitative research refers to a study's credibility, dependability, confirmability, and transferability. A study is deemed credible if its findings are representative of the respondents who participated in it. Transferability refers to the applicability of findings in other contexts (Treharne & Riggs, 2015). The dependability of a study is determined by whether a different researcher could reasonably achieve similar

findings, and confirmability refers to findings that are truly the product of participant responses and not researcher bias (Treharne & Riggs, 2015). All four measures of trustworthiness were considered in the design of this study and contributed to the overall quality of the study, as well as the reliability of its findings.

### **Transferability**

Although generalizability of findings is not a goal of qualitative research, information that contributes to transferability determinations is valuable for those who may experience the phenomenon in other contexts (Shenton, 2004). As noted in Chapter 3, I implemented two methods to enhance the transferability of this study. First, I used the survey to collect demographic data for participant courts. Although offender motivations are variable, it is reasonable to assume that courts with comparable demographics are likely to report similar experiences. With that in mind, I documented court demographic data for each respondent court, including program eligibility requirements and offense types accepted, to provide readers with the information needed to make a transferability determination. The broad demographic data furnished were limited out of necessity to maintain participant and court anonymity.

The target populations selected for inclusion in this study are the second measure taken to enhance transferability and constitute the strongest case for the transferability of this study's findings because they included coordinators and attorneys from multiple jurisdictions across Georgia rather than participants from a single court program or county. The target populations for this study were VTC coordinators, prosecuting attorneys, and defense attorneys. The perspective of a coordinator or attorney is a

cumulative representation of what is most typical of their respective court as opposed to the singular experience of individual veterans. Therefore, the data obtained from 33 VTC actors is presumably a more accurate representation of the phenomenon generally than the data obtained from 33 veterans.

### **Credibility**

The collective perspective of VTC coordinators alone may not have provided a complete picture of the barriers veteran defendants encounter when making court processing decisions. To ensure as many informed views were included in this study as possible, defense and prosecuting attorneys experienced with both veteran defendants and VTCs were also included as target populations for triangulation purposes. Triangulation enhances the credibility of a study by corroborating data across multiple sources (Shenton, 2004). This measure to enhance trustworthiness is important because the data must reflect what is true, in reality, for those experiencing the phenomenon, and a singular perspective may not achieve that. Attorneys who have professional experience representing or prosecuting veteran defendants are credible sources of information regarding the experiences of veteran defendants faced with VTC decisions. VTC coordinators are also knowledgeable of the veteran defendant experience and can speak to the procedural barriers that may prevent their participation in VTC programs. Therefore, data from three sources are reasonably believed to be more credible than data from a single source (Shenton, 2004). I developed the three survey instruments utilized for this study using existing literature of studies on the subject of VTC participation (see Ahlin & Douds, 2020; Baldwin, 2017; Herzog et al., 2019). Adapting the instrumentation

tools of related studies to the target populations of the present study and consulting with a professional in the field (VTC coordinator) were the steps I took to ensure credibility of the instruments.

### **Dependability**

My dissertation committee members served as external auditors to ensure my research was dependable. Having a researcher who was not involved with my study examine my methods, survey instruments, analysis, and conclusions was essential to the dependability of my study. The objectivity of external auditors is an important safeguard against researcher bias, which is inevitable in the creation of data collection tools (Shenton, 2004). Therefore, qualified researchers provided critical feedback of every aspect of this study in service of maintaining dependability throughout. Furthermore, I thoroughly documented the steps taken to conduct the research in Chapters 3 and 4 to furnish future researchers with sufficient information for study duplication (Shenton, 2004).

### **Confirmability**

Not only did input from other researchers help to build a stronger case for the trustworthiness of my research, but the ability to articulate and justify the decisions made during the data collection and analysis processes ensured confirmability. Therefore, I maintained a reflexivity journal to remain deliberate about the choices I made while conducting my study. Reflexive journaling is an effective way to promote the trustworthiness of qualitative research and is a practice I exercised for the purpose of enhancing the overall quality of my study (Barrett et al., 2020). Additionally, I selected a



peer debrief partner from my doctoral studies cohort to analyze and code responses. I sent the survey results recorded in an Excel file to another doctoral student for review and coding. The data did not contain any identifying information but were organized by generic identifiers (P1 to P11 for each survey). Discussion with a qualified peer of the most appropriate codes for analysis helped to ensure intercoder reliability. This was necessary to confirm the codes, categories, and themes developed were truly representative of the respondents and not formed by my own predisposition.

### **Results**

I designed this study to answer the following RQ: What factors do veterans' treatment court actors identify as the reasons why veteran defendants decline participation in VTC programs? The qualitative data collected from responses to three open-ended questions in a survey administered to VTC coordinators, prosecuting attorneys, and public defenders from county and circuit courts in Georgia provided answers to this question. The first question asked what relationship, if any, the respondent had seen between a veteran-criminal conflict of identities and their decision to opt out of VTC. The second question developed to answer the RQ asked what reasons veteran defendants had offered as to why they chose not to participate in VTC. The third question asked for respondents' professional opinion as to why veteran defendants refused participation in their VTC program. The results of the three questions are presented in this section. A fourth open-ended question was posed to survey participants, requesting their recommendations for improving VTC programs. The results of that question are also presented in this section.

The bulk of recent literature on the subject of veteran defendant participation in VTC is grounded in identity theory, suggesting that a veteran's sense of military identity is in conflict with their identity as a criminal defendant (Adams et al., 2019; Ahlin & Douds, 2020). The decision to opt out of VTC has been attributed by some scholars to a veteran defendant's difficulty reconciling their veteran-criminal identities. To investigate this possible explanation for non-participation in VTCs, I asked the following survey question of participants: Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC? Of the 33 responses, 49% of respondents reported they did not know (see Table 5). One respondent wrote, "I think it may have some impact I just don't know to what degree." This finding was not surprising considering the nature of the question. It is reasonable to assume that some VTC actors may not be positioned to answer psychologically personal questions about veteran defendants. A weak relationship was reported by 15% of respondents and another 15% indicated there is no relationship, stating the following:

While some of the veterans I have referred seem to want to underplay their service, I can't think of anyone who has chosen not to participate in VTC who has done so because of some tension between their military service and being charged with a crime.

**Table 5***VTC Actors' Perceptions of Conflicting Identities*

Theme/Category	Frequency, <i>n</i> (%)	Sample quote(s)
No relationship	5 15%	"While some of the veterans I have referred seem to want to underplay their service, I can't think of anyone who has chosen not to participate in VTC who has done so because of some tension between their military service and being charged with a crime."
Weak relationship	5 15%	"I don't see much of a relationship."
Strong relationship	7 21%	"Some Veterans do not consider themselves "true" Veterans once they get into a group where there are Veterans who appear to have had more intense service assignments."
Veteran identity		
Veteran as ideal citizen		"Some veterans are typically prideful and struggle with distorted thinking due to perception of what a veteran stands for, it is nothing criminal but the ideal citizen. Anything adverse to law-abiding is frowned upon."
I don't know	16 49%	"I think it may have some impact I just don't know to what degree."

*Note.* Frequency (*n* / %) refers to the number of words and phrases found to support the identified themes and the percentage they represent among the total number of codes (*N* = 33) found across all responses to the survey question.

Finally, 21% of respondents reported a strong relationship between veteran-criminal identity and VTC participation. The concepts of veteran identity and veteran as ideal citizen were presented as possibly influential in a veteran defendant's decision-making process. While a central sense of veteran identity may encourage one veteran defendant to participate in VTC, the contradiction of a veteran as a criminal defendant and an ideal citizen may discourage participation in another. The results of this survey question lend some support to the theory that veteran identity may play a role in VTC decisions, depending upon an individual's conceptualization of veteran and self-identification as veteran, and could encourage or discourage VTC program participation.

Aside from identity theory, there may be other explanations for non-participation in VTC. To explore this possibility, I asked survey participants the following question: What reasons have VTC-eligible veteran defendants offered as to why they do not wish to participate in VTC? The exploratory nature of this question allowed VTC actors to identify all of the reasons they had been presented with by defendants who opted out of their program. Thematic analysis of responses to this question yielded 79 total codes. I grouped the 79 codes into 30 categories and further grouped the categories into five themes (see Table 6). Of the 79 codes found in response to the question asking what reasons defendants gave for opting out of VTC, 38 (48%) referred to program requirements. Regarding program rigor, multiple statements echoed the sentiment that program requirements were too strenuous. Respondents also stated the length of the program was a deterrent for eligible participants.

**Table 6***Reasons for Opting Out of VTC*

Theme	Frequency, <i>n</i> (%)	Category	Sample quote
Program requirements	38 48%	Program length	“Oftentimes the length of the program can be a deterrent.”
		Program rigor	“The program requirements are too strenuous.”
Readiness to change (RTC)	9 11%	Treatment	“We run into the problem of some thinking they don't need help for substance abuse or their mental health.”
		Lifestyle change	“Most people don't want to have to change their lifestyle.”
Alternatives	13 17%	Prefer probation	“The probation sentence is less strenuous than pleading into VTC and meeting our standards.”
		“Do time”	“They would rather just do their time.”
Perceptions of programming and leadership	10 13%	Not worth it	“Don't think post-adjudication benefits outweigh length of program.”
Reasons unknown	9 11%	Don't know	

*Note.* Frequency (*n* / %) refers to the number of words and phrases found to support the identified themes and the percentage they represent among the total number of codes (*N* = 79) found across all responses to the survey question.

As presented in Chapter 2, RTC refers to a person's readiness to accept treatment for a SUD. Codes related to RTC represented 11% of the 79 total codes found in response to this question. Concerns that veteran defendants simply were not ready to accept treatment for drug or alcohol dependency were expressed by nine respondents. One respondent wrote, "We run into the problem of some thinking they don't need help for substance abuse or their mental health." Other respondents stated veteran defendants did not want to change their lifestyle, which they would certainly be required to do if they participated in a VTC program. Not feeling ready to stop using drugs or make a major lifestyle change could cause veteran defendants to decline VTC in favor of other options that do not require the same level of commitment. Alternatives to VTC was another theme to emerge from the responses to this question, with 17% of codes relating to veteran preference for probation and other easier options. For example, a respondent claimed, "The probation sentence is less strenuous than pleading into VTC and meeting our standards." Another respondent stated, "They would rather just do their time." Veteran defendants that are not ready to make the changes necessary to comply with VTC requirements may view alternatives such as probation as the less radical of changes and opt out of VTC for that reason. While VTC actors may not be able to influence an individual's RTC, there may be some practical changes to programming that can be made to enhance the attractiveness of program participation. Such changes proposed by survey respondents are detailed later in this chapter.

Perceptions of programming and leadership was the fourth theme found in survey responses to the question of what reasons defendants have given for opting out of VTC.

Of the 79 codes, 13% were related to how veterans perceive various aspects of VTC and its leadership. Responses addressed the lack of military experience among program leadership, distrust of VA, dislike of the VTC judge, and the inability of leadership to identify with the unique challenges faced by veterans. This finding is significant in that it highlights a number of systemic characteristics, possibly flaws, that are impacting participation decisions. Dissatisfaction with the VA is a longstanding grievance of veterans and its affiliation with VTC may be discouraging veterans from getting the treatment and benefits they need. Furthermore, court personnel without military experience may considerably hinder participation, as some respondents indicated. If VTC actors do not fully comprehend the unique challenges veterans face, perhaps they are not best suited to assist them. Even if that is not the case, the perception that it is true may be sufficient to influence opt-out decisions. The last finding for this survey question is that 11% of responses indicated the respondent did not know why VTC-eligible defendants declined to participate in VTC. This result emphasizes the existence of a knowledge gap on this subject and the importance of the present study to inform practitioners of the barriers to participation in VTC programs.

I asked survey participants the following question: In your professional opinion, what are the reasons why VTC-eligible veteran defendants opt out of participation in your VTC? This question is related to the last question and was posed to prompt respondents to critically consider the reasons for opt-out beyond what they had been told by defendants. This question produced similar results as the related question, with one exception. Of the 93 total codes found in responses to this question, 50% were related to

program requirements, including time commitment and program rigor (see Table 7). RTC was represented by 17% of all codes and also included treatment and lifestyle change as was found in the related question. Alternatives accounted for 16% of codes and included the categories of first offender treatment and prefer probation. Perceptions of programming and leadership represented 11% of codes and reasons unknown totaled 4%.

The finding that was not present in the related question was the theme of lack of awareness, which accounted for 2% of responses. Lack of awareness referred to practitioners' inability to identify program candidates in a timely manner, or at all, as well as veteran defendants' ignorance of VTC as an option. Regarding defendants being unaware of VTC, one respondent wrote, "They often times don't know about the program until they have already resolved their case." As mentioned earlier in this chapter, a lack of awareness that VTC exists or is an option is not equivalent to opting out, yet the result is the same. Veteran defendants who are not made aware of the resources available to them do not have the opportunity to decide which court processing option is best for their needs.



**Table 7***VTC Actors' Perceptions of VTC Opt-Out*

Theme	Frequency, <i>n</i> (%)	Category	Sample quote
Program requirements	46 50%	Time commitment	"Attendance requirements of the program interfere with the ability to work."
		Program rigor	"The level of participation required is too great for them."
Readiness to change (RTC)	16 17%	Treatment	"They just do not want to get treatment."
		Lifestyle change	"I think it is a mix of wanting to continue as they have been and not make a commitment to making a significant change."
Alternatives	15 16%	First offender treatment	"They avail themselves to first offender treatment which has a more guaranteed outcome of no adjudication."
		Prefer probation	"Probation is easier to complete."
Perceptions of programming and leadership	10 11%	Nonbeneficial	"I think that the perception these veterans have is that any benefits are outweighed by the burden of participation."
		Military experience	"Program leadership does not have prior military experience."
Lack of awareness	2 2%	Candidate identification	"We also have a hard time identifying veterans."
		Unaware of program	"They often times don't know about the program until they have already resolved their case."
Reasons unknown	4 4%	Don't know	

*Note.* Frequency (*n* / %) refers to the number of words and phrases found to support the identified themes and the percentage they represent among the total number of codes (*N* = 93) found across all responses to the survey question.

The fourth open-ended question I asked survey participants was: What changes to your VTC do you believe would result in increased participation? This question was posed to VTC actors who are best suited to inform recommendations made by this study. I thematically analyzed the responses to this question, yielding 54 codes. Of the 54 codes, the most prevalent response was the proposal to expand eligibility, accounting for 37% of responses (see Table 8). Respondents stated that VTC should be an option for at-risk defendants, veterans with only a mental health diagnosis, violent offenses, and gun charges. Regarding expanding eligibility to include at-risk defendants, one respondent proposed the following: “Some services for at-risk veterans, such as those who have committed a misdemeanor that would not qualify for VTC but have not yet committed a felony.” Some VTCs only allow participants with both a mental health disorder and a SUD. Respondents proposed expanding eligibility to those who have a mental health disorder only and not a SUD. For example, one respondent wrote, “Have more treatment options for veterans who do not have a drug/alcohol addiction, and just need mental health treatment.” Expanding eligibility is the most popular change respondents would make to increase participation in their VTC program. Making it easier for veteran defendants to qualify for the benefits of VTC is the most logical method for maximizing participation.

Of all responses to this question, improving program/enhancing benefits accounted for 24% of responses. This proposed change included suggestions to improve program efficiency, increase judicial involvement, provide housing assistance, and offer more sophisticated job placement. The strategy inferred from these statements is to

increase the benefits of VTC participation so that it is worth the effort required of participants. Raise awareness accounted for 18% of responses and pertains to case referrals, data on VTC efficacy, educating veteran defendants on VTC benefits, a better understanding of veteran issues by attorneys, and community awareness. A problem that respondents reported is that cases are not always identified for referral. Again, in some instances, veteran defendants who do not participate in VTC did not necessarily opt out of VTC but were simply unaware of it as an option. Raising awareness also includes making attorneys more knowledgeable of veteran defendant needs. One respondent recommended the following: “More understanding by defense and prosecution of the issues specific to veterans that lead to criminal conduct.” Raising awareness through data and education offers a promising solution to confronting barriers to VTC participation. Studies such as this may provide practitioners with the information they need to improve programming, attract more participants, and deliver the services veterans need to overcome criminal behavior.

**Table 8***Recommendations for VTCs*

Theme	Frequency, <i>n</i> (%)	Category	Sample quote
No changes	8 15%	Program success	"I would not propose any changes because: Our program seems to be working well."
Expand eligibility	20 37%	Mental health diagnosis only	"Have more treatment options for veterans who do not have a drug/alcohol addiction, and just need mental health treatment."
		At-risk defendants	"Some services for at-risk veterans, such as those who have committed a misdemeanor that would not qualify for VTC but have not yet committed a felony."
Improve program/enhance benefits	13 24%	Program efficiency	"More organization within the program."
		Housing assistance	"Implementation of housing assistance."
Raise awareness	10 18%	Case referrals	"The problem is that defense counsel and prosecution often does not identify cases for referral."
		Data	"More data about success of VTC (decrease in recidivism, tax payers money saved on maintaining defendants in jail/prison)."
		Intensive outpatient	"Some participants do not need intensive outpatient."
Reduce program intensity	3 6%	Program intensity	"Shortened/less intensive program."

*Note.* Frequency (*n* / %) refers to the number of words and phrases found to support the identified themes and the percentage they represent among the total number of codes (*N* = 54) found across all responses to the survey question.

The theme no changes represented 15% of responses, supported by claims that the respondents' programs were successful, working well, and maintained sufficient resources. Reduce program intensity accounted for 6% of the 54 codes found in responses to this survey question. Respondents proposed shortening the program and making it less intense, reducing requirements, and offering less intensive outpatient services. Such changes would expand eligibility to more veterans and could also increase the attractiveness of VTC programs. The changes proposed by VTC coordinators, prosecuting attorneys, and public defenders make this study even more valuable, as they offer potential solutions to non-participation in VTC programs.

### **Summary**

Qualitative responses to four open-ended questions presented to survey participants revealed a number of themes that assist in guiding the discussion on VTC participation. The finding of the present study that a defendant's sense of veteran identity is influential in their VTC participation decisions is supported by earlier studies, which found that veteran identity influences the services veterans use. All five themes to emerge from responses regarding the reasons veteran defendants offered as to why they opted out of VTC - program requirements, RTC, alternatives, perceptions of programming and leadership, and reasons unknown- were supported by earlier research, which will be discussed further in Chapter 5. When I asked VTC actors what they believed the reasons for non-participation were, however, a sixth theme not identified in prior studies emerged. The theme suggested that a lack of awareness among attorneys and veteran defendants of VTC may also be responsible. These findings sufficiently answer the RQ

and are in alignment with the tenets of GST. Finally, when I asked what changes they would make to their VTC to increase participation, respondents offered four main recommendations- expand eligibility, improve program/enhance benefits, raise awareness, and reduce program intensity. The interpretation of these findings and the implications for social change will be presented in Chapter 5.

## Chapter 5: Discussion, Conclusions, and Recommendations

### Introduction

Advances in warfare technologies have produced the fortunate result of minimizing American military casualties in modern conflicts. Consequently, the volume of servicemembers surviving their tours of duty has outpaced those of earlier wars. Therefore, some veterans have deployed to war zones more than once. Many veterans of Operation Iraqi Freedom, Operation Enduring Freedom, and Operation New Dawn were deployed multiple times and served longer tours than veterans of earlier conflicts (Chretien & Chretien, 2013). Although the physical and emotional damages of battle have manifested in the lives of soldiers for generations, the number of veterans grappling with the challenges of reassimilating into civilian life has significantly grown. The impact of such growth has been felt by the criminal justice system, which has evolved by necessity to meet the needs of a large veteran population who has served in extreme environments and for extended periods of time. One such adaptation is the development of VTCs.

As discussed in Chapter 2, studies on the efficacy of VTCs to reduce recidivism has shown promising results. Despite the overall favorable outlook on VTC programming, some veteran defendants do not qualify for participation, and other eligible candidates choose to opt out of participating. The purpose of this study was to discover the reasons why veteran defendants decline participation in VTC so that recommendations can be identified to improve programming and maximize participation. A qualitative method was used to understand the reasons, according to VTC coordinators,

prosecuting attorneys, and public defenders, eligible veterans choose traditional court processing in jurisdictions where VTC is an option. Because diversion court for veterans is still a novel concept, exploratory questioning was the most appropriate inquiry method for discovering as much new information on the subject as possible.

With GST as the theoretical basis, I designed this study to discover the factors that influence veteran offenders' decision making. Once I collected survey data, they were analyzed by theming to determine what factors VTC actors identified as most influential in veterans' VTC decisions. According to 33 respondents, the most reported reasons for opting out of VTC were program requirements, RTC, alternatives, and perceptions of programming and leadership. In a separate and related survey question regarding their professional opinion of the reasons for opt-out, a small percentage of respondents (2%) indicated that a lack of awareness was also responsible. These findings suggest that there are a multitude of external and internal factors that are considered when VTC decisions are made. Respondents were also asked to indicate their understanding of the relationship between the conflicting identities of being both a veteran and a criminal and the VTC participation decision. Nearly half of respondents did not know if a relationship existed. For responses in support of a strong relationship between veteran-criminal identity and the decision to opt out of VTC, the most common themes were veteran identity and veteran as ideal citizen. These findings suggest the psychological aspects of militarization, such as the existence and prevalence of a veteran identity, are also influential in a veteran defendant's decision to decline VTC participation.



### **Interpretation of the Findings**

The results of this study confirmed what has been found in the peer-reviewed literature on the subject of VTC participation. Specifically, both external factors and veteran identity are shown to influence the court processing decisions of veteran defendants. The findings of the present study also extend knowledge in the discipline in significant ways. First, in this study, I relied on original and recent data, which offered the timeliest information presently available from VTC actors. Second, this study included multiple perspectives to gain the most comprehensive understanding of veteran decision making. While related studies surveyed only VTC administrators, the present study also contained the views and experiences of prosecutors, solicitors, and public defense attorneys who served in jurisdictions with VTCs and who had experience prosecuting or representing veteran defendants. This was important for making well-informed recommendations to improve VTC programming. Finally, including criminal attorneys as a population of the sample resulted in the discovery of an additional reason why veteran defendants do not participate in VTC. Responses from attorneys suggested a lack of awareness is at least partially responsible for an insufficient number of case referrals by both prosecuting and defense attorneys.

GST was selected to underpin the present study because of its applicability to the veteran experience, particularly the presence of extreme stressors and their influence on emotions and wellbeing, trauma characteristic of the military experience, and recognition of antisocial behavior as a symptom of coping with stress and trauma. For veterans who have turned to criminal behaviors as their means of coping, GST offers a better

understanding of why veteran offenders may find it difficult to seek or accept treatment. According to GST, criminal coping is more likely under certain conditions and by individuals possessing a particular set of characteristics (Agnew, 2013). For example, veterans with PTSD and anger, and who are experiencing strain, may be at greater risk for criminal coping behaviors. In the case of veteran defendants confronted with a VTC decision, the strains they experience could range greatly from difficulty finding a job or housing to missing a sense of purpose and structure experienced in their former military roles. Despite the need for treatment, veterans may be unwilling or unable to abandon their maladaptive coping methods depending on the frequency and severity of the strain. A defendant's readiness to seek or accept treatment (RTC) has been identified as a barrier to VTC participation in the literature. According to Baldwin (2017), 16% of VTC coordinators indicated that defendants who opted out of VTC did so because they did not want treatment, or they wanted to continue using drugs and alcohol. Results of the present study confirmed those findings. When asked what reasons veteran defendants give for opting out of VTC, a respondent wrote, "We run into the problem of some thinking they don't need help for substance abuse or their mental health." Another respondent commented, "Not interested in beginning treatment or getting sober." A defendant's RTC may represent a barrier to VTC that cannot be overcome by well-meaning court administrators and attorneys. Perhaps the most effective strategy of combating reluctance to accept treatment is the promotion of VTC benefits that outweigh the costs of participation.

A second barrier to participation that may prove difficult for VTC actors to overcome is the impact of veteran identity. The finding of the present study that veteran identity may be a factor in VTC participation supported prior research by Adams et al. (2019) that identified that the extent of a person's veteran identity will determine the services they use. Furthermore, veterans who see their criminal involvement as contrary to their concept of an ideal citizen may find it shameful to claim veteran status. This finding supports earlier research by Ahlin and Douds (2020), who asserted that veteran defendants are influenced by personal shame and fear of dishonoring their military branch of service when making VTC participation decisions. The conflict of veteran and criminal identities may represent a strain experienced by veteran defendants with a central sense of veteran identity, causing them to opt out of VTC due to shame. On the other hand, veterans with a low sense of veteran identity may opt out of VTC because they do not feel like a true veteran. Either they do not identify as a veteran because their criminal behavior is at odds with their perception of veterans as ideal citizens, or they believe their military service does not measure up with the more extreme experiences of other veterans. Whatever the reason, the finding that veteran identity is significant in VTC participation is consistent with the peer-reviewed literature.

The dominant theme found in responses to the reasons why veterans opt out of VTC was program requirements. This theme is consistent with Baldwin's (2017) study, which found that over 37% of VTC coordinators indicated that veteran defendants declined participation in their VTC due to program rigor. The demands of VTCs are extensive-- regular court attendance, mental and substance abuse treatment, mentorship

meetings, drug screens, housing and job requirements, etcetera. For veteran defendants already struggling with daily self-maintenance, the added strains of VTC participation may prove too great for consideration. That helps to explain the findings of the present study, with 17% of respondents reporting that alternatives are a factor in whether defendants choose VTC. The concept of alternatives as a reason why veterans opt out of VTC is also supported by the findings of Baldwin's research, which found that nearly 9% of respondents reported veteran defendants opted out because they believed they could get a better deal in criminal court. As respondents indicated, probation and first offender services often available to veteran defendants are less strenuous and, therefore, more attractive options. The significance of the finding that program requirements are the primary reason why eligible candidates opt out of VTC lies in the knowledge that they can be reformed to encourage participation.

The finding of this study that 13% of VTC actors believe perceptions of leadership and programming factor into a defendant's decision to decline participation in VTC is supported by earlier research. Herzog et al. (2019) and Baldwin (2017) reported on the importance of veteran defendants' perceptions of the VTC judge and the impact of negative VA experiences relative to the VTC participation decision. The present study also revealed that perceptions of the VTC judge and VA are influential, as well as the appearance of a nonuniform standard, and the belief that VTC personnel cannot identify with the unique challenges veterans face. These perceptions speak to a sense of injustice that veterans may feel and, consistent with GST, may be indicative of strain characteristics that cause negative emotions and are most likely to lead to crime (Agnew,

2001). Another important finding of Baldwin's study was that 27% of the 79 VTC coordinators surveyed indicated they did not know why eligible veterans opted out of their program. This finding was confirmed by the present study, although to a lesser extent, which found that 11% of respondents did not know why eligible candidates opted out of VTC. These results highlight, once again, the need for VTC administrators to evaluate their programs and learn what is impeding participation.

The final finding of this study was that a lack of awareness plays a role in VTC nonparticipation, as indicated by 2% of survey participants. Respondents indicated, in some instances, defendants were not even aware VTC was an option, or they found out too late in the adjudication process. In other cases, eligible candidates were not identified by prosecution or defense and, therefore, the necessary referrals to VTC were never made. This result was of particular significance because it was not found in earlier studies on the subject, which have sampled only VTC administrators and program participants and not attorneys. Understanding that a lack of awareness may be responsible for diminished participation is important because it represents an obstacle that can be overcome by educating defense attorneys, prosecuting attorneys, and veteran defendants on VTC and its benefits.

### **Limitations of the Study**

The first limitation of this study was that it relied upon the subjective experiences and views of VTC coordinators and attorneys rather than veteran defendants. Although this was done to protect a potentially vulnerable population, a sample of veteran defendants who opted out of VTC may have produced different results. While the

findings of this study suggested that coordinators and criminal attorneys were knowledgeable of the obstacles veteran offenders encounter, it is possible that the factors influencing them to opt out were not communicated back to the VTC, prosecution, or defense counsel. It is also possible that VTC actors misinterpreted veteran defendant motivations and experiences, which could have resulted in their misrepresentation in this study.

A second limitation of this study was the potentially limited applicability of its findings. All VTCs in the state of Georgia were invited to participate, yet it is unknown how the respondent courts compare with the Georgia VTCs not represented in the sample. It is also unknown how the participant courts compare with VTCs nationwide. Demographic data collected from respondents were restricted to ensure court anonymity and that, presumably, makes transferability determinations more difficult. Finally, the use of a survey to collect qualitative data was not ideal. Electronically administered surveys were chosen for this study, however, to maintain COVID-19 social distancing guidelines and as an asynchronous modality anticipated to elicit the greatest number of participants. Interviews are traditionally considered to be the preferred data collection tool of qualitative inquiry for their ability to produce detailed and thorough responses. The survey format is believed to have contributed to brief responses provided by a small number of participants.

### **Recommendations**

A thorough review of peer-reviewed literature about VTC participation has uncovered a number of issues that should be the subjects of further research. First, a

common limitation of multiple studies on VTCs is the lack of gender diversity among program participants. The rationale of females making VTC decisions appears to be relatively unknown because studies have consistently shown they are underrepresented as VTC participants. Racial and ethnic minorities are also underrepresented among VTC participants, who tend to be White and male. Research on the challenges faced by female and minority veteran defendants may reveal a unique host of barriers to participation not accounted for by existing studies consisting primarily of White male experiences.

A second recommendation for further study is the implementation of a domestic violence intervention and its impact on VTC participation. Several respondents indicated that DV cases were excluded from their program and recommended expanding eligibility by allowing domestic and intimate partner violence (IPV) defendants into VTC programs. One respondent suggested the following: “Add DV intervention and victim services to allow program to serve those charged with DV/IPV cases.” Another respondent reported that many veterans are not eligible to participate due to a lack of DV interventions in their VTC. Further research on effective DV and IPV interventions, such as a victim impact component, and the feasibility of their implementation by VTCs should be researched further. The opportunity for VTCs to participate in restorative justice by intervening in DV/IPV cases has the potential to restore veteran defendants to the stability of a family and home life.

A final recommendation for further research is the impact of COVID-19 on VTC procedure, personnel, participants, programming, resources, and outcomes. While the damaging reach of the pandemic still remains to be seen, it is already projected to have a

particularly significant impact on veteran defendants. Increased mental health symptoms, including anxiety and depression, difficulty accessing resources such as treatment, employment, and housing, and increased substance use have already been reported since the onset of the pandemic in the United States in early 2020 (Holliday et al., 2021). The strain of the pandemic presents even greater barriers to treatment for veterans already experiencing the challenges of assimilating back into civilian life. Mandated social isolation, for example, may diminish the social support veteran offenders need for successful rehabilitation. The full impact of COVID-19 may take years to become apparent, yet it is reasonable to anticipate an immoderate negative effect on justice-involved veterans who are already experiencing an inordinate amount of strain. Further research should be conducted to learn what aspects of VTC programming remain beneficial, are no longer serving participants, or need to be adjusted to account for the residual effects of COVID-19.

### **Implications**

The potential for increased VTC participation to create positive social change is best demonstrated in terms of criminal recidivism. Traditionally, recidivism rates are in the range of 70% for general offenders (Frederick, 2014). Early studies of VTC graduates, however, reflect a less than 2% recidivism rate (Frederick, 2014). The topic of veteran-specific treatment is important because service members have undergone unique experiences that have damaged their mental and physical health, and they are entitled to individualized support following their service. VTCs offer a way for the criminal justice



system to assist veterans with healthy and prosocial methods of coping with the mental and emotional aftermath of combat that has contributed to their criminal behavior.

The improvement and further utilization of VTCs presents a significant opportunity for the criminal justice system to be involved in promoting positive social change by improving outcomes for all veterans in need of treatment. The survey instruments utilized in the present study were administered to VTC actors in the state of Georgia and asked participants what changes to their VTC do they believe would result in increased participation. I posed this question to collect the informed recommendations of VTC coordinators, prosecutors, and public defenders for the purpose of enhancing VTC practices. The most common recommendation for VTCs was to expand eligibility. Respondents stated that VTC should be an option for more veterans, including misdemeanants and defendants with only a mental health diagnosis. VTCs may even consider expanding eligibility to veterans with “other than honorable” and, possibly, dishonorable discharges on an individual or case-by-case basis. Changes to discharge categories for VTC eligibility purposes may require congressional action. Respondents also recommended improvements to the program’s efficiency, provision of housing and employment assistance, increased judicial involvement, reduced program intensity, and raised awareness of VTC among attorneys and defendants. The recommendations for offering housing assistance and more sophisticated job placement would specifically address some of the strains veterans are known to experience when entering civilian life. Overall, implementing the changes recommended by practitioners may maximize benefits

for participants, and remove common barriers to participation, thereby attracting more veteran defendants to VTC.

### **Conclusion**

Veterans are overrepresented among the inmate population of the United States and this phenomenon has been recognized as a consequence of the trauma characteristic of military service (Calhoun et al., 2004; Lapierre et al., 2007; Pandiani et al., 2003; Snowden et al., 2017). The psychological fallout of extended tours of duty in volatile conditions has had lasting impact on too many members of the United States military. A household term now, PTSD is widely recognized as a contributing factor to maladaptive coping and antisocial behavior (Watts & Wright, 2021). In response, VTCs were developed to holistically address the service-specific needs of veteran defendants, including treatment for PTSD, substance dependency, and anger. VTCs incorporate peer mentorship and VA services that offer culturally competent programming for veteran defendants who are willing to accept the help. While some defendants may not be ready to make the lifestyle changes needed for successful rehabilitation, there are other legitimate barriers to participation that can be overcome. VTC participation can be increased by expanding eligibility to more defendants, enhancing program benefits, and raising awareness of VTC programs where they are available. The potential for veteran defendants to recover from trauma and lead healthy, successful lives makes the effort of reforming VTCs a worthy cause.

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## Appendix: Survey Instrument

1. Please read the following informed consent statement:

You are invited to take part in a research study about participation in Veterans' Treatment Court (VTC). This form is part of a process called "informed consent" to allow you to understand this study before deciding whether to take part. This study seeks 36 volunteers who have professional experience working with veteran defendants. This study is being conducted by a researcher who is a doctoral student at Walden University.

### ***STUDY PURPOSE***

The purpose of the study is to learn the reasons why veteran offenders refuse participation in Veterans' Treatment Court, according to VTC coordinators and criminal attorneys.

### ***PROCEDURES***

This study will involve you completing an anonymous online survey that should take approximately 20 minutes to complete.

### ***VOLUNTEER NATURE OF THE STUDY***

Research should only be done with those who freely volunteer. Your participation in this survey is voluntary. You may refuse to take part in the research or exit the survey at any time without penalty. You may skip any question you do not wish to answer for any reason.

### ***BENEFITS & RISKS***

Being in this study could involve some risk of the minor discomforts that can be encountered in daily life such as sharing sensitive information. With the protections in place, this study would pose minimal risk to your wellbeing. Individual volunteers will receive no direct benefits from participating in this research study. The aim of this study is to benefit society by learning what can be done to maximize participation in VTC.

### ***PAYMENT***

None.

### ***PRIVACY***

The researcher is required to protect your privacy. Your identity will be kept anonymous, within the limits of the law. The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. If the researcher were to share this dataset with another researcher in the future, the dataset would contain no identifiers so this would not involve another round of obtaining informed consent. Data will be kept secure in a password protected SurveyMonkey account accessible only to the researcher. Data will be kept for a period of at least 5 years, as required by the university.

**CONTACT**

If you want to talk privately about your rights as a participant, or any negative parts of the study, you can call Walden University's Research Participant Advocate by email at [irb@mail.waldenu.edu](mailto:irb@mail.waldenu.edu) or dial 612-312-1210 (provide international code if outside the USA). Walden University's approval number for this study is 02-11-22-1015034. It expires on February 10, 2023. You might wish to retain this consent form for your records. You may ask the researcher or Walden University for a copy at any time using the contact info above.

**ELECTRONIC CONSENT: Please select your choice below. Clicking on the "Agree" button indicates that**

- You have read the above information
- You voluntarily agree to participate
- You are 18 years of age or older
- Agree
- Disagree

**2. Please select the job title that most closely represents your professional role:**

- VTC Coordinator/Director
- Defense Attorney
- Prosecuting Attorney
- None of the above (*exit survey*)

*For VTC Coordinators/Directors*

**3. Please select which of the following best classifies the geographic area of your VTC:**

- Urban
- Rural
- Mixed urban and rural
- I don't know

**4. Please select which of the following best describes your VTC:**

- A track within a mental health court/docket
- A track within a drug court/docket
- Its own separate court/docket
- Other: \_\_\_\_\_

**5. Please select which of the following best describes your VTC:**

- Serves one county only
- Serves two or more counties as part of a multi-jurisdictional circuit
- I don't know

Other: \_\_\_\_\_

**6. Please select which of the following best describes YOUR military experience:**

- Military experience
- Military with combat experience
- No military experience

**7. Please select which of the following best describes the military experience of your VTC judge. If your VTC has more than one judge, please indicate the military experience of each judge in the "Other" text box:**

- Military experience
- Military with combat experience
- No military experience
- I don't know
- Other: \_\_\_\_\_

**8. Please indicate the offense type(s) accepted by your VTC (select all that apply):**

- Some misdemeanors
- All misdemeanors
- Some felonies
- All felonies
- Other/clarify: \_\_\_\_\_

**9. Please indicate the eligibility requirements for participants used by your VTC (select all that apply):**

- Honorable discharge
- Combat experience
- A nexus between current charge and military service
- No prior violent convictions
- Veteran had to be in prior treatment
- Veteran could not be in prior treatment
- Other eligibility criteria: \_\_\_\_\_

**10. Please indicate the approximate percentage, in your estimation, of VTC-eligible veteran offenders that decline participation in your VTC:**

- 0%
- 1-10%
- 11-20%
- 21-30%
- 31-40%
- 41-50%
- 51-60%
- 61-70%
- 71-80%



- 81-90%
- 91-100%
- I don't know

**11. What reasons have VTC-eligible veteran offenders offered as to why they do not wish to participate in your VTC? Please list all known reasons:**

\_\_\_\_\_

**12. In your professional opinion, what are the reasons why VTC-eligible veteran offenders opt out of participation in your VTC? Please list all the reasons you believe are responsible for non-participation:**

\_\_\_\_\_

**13. Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC?**

- No relationship  
Please explain your response: \_\_\_\_\_
- Weak relationship  
Please explain your response: \_\_\_\_\_
- Strong relationship  
Please explain your response: \_\_\_\_\_
- I don't know
- Other: \_\_\_\_\_

**14. What changes to your VTC do you believe would result in increased participation? Please provide an explanation for each proposed change:**

\_\_\_\_\_

Thank you for participating in this survey!

Your responses will be used to learn more about Veterans' Treatment Court and what can be done to enhance VTC participation. Thank you for all that you do in service of our military and your dedication to improving outcomes for veterans.

*For Defense Attorneys*

**3. Do you have experience representing military veteran defendants?**

- Yes (continue to question #4)
- No (exit survey)
- I don't know (exit survey)

**4. Please select which of the following best classifies the geographic area of the VTC in your jurisdiction:**

- Urban
- Rural
- Mixed urban and rural
- I don't know

**5. Please select which of the following best describes the VTC in your jurisdiction:**

- A track within a mental health court/docket
- A track within a drug court/docket
- Its own separate court/docket
- I don't know
- Other: \_\_\_\_\_

**6. Please select which of the following best describes the VTC in your jurisdiction:**

- Serves one county only
- Serves two or more counties as part of a multi-jurisdictional circuit
- I don't know
- Other: \_\_\_\_\_

**7. Please indicate the offense type(s) accepted by the VTC in your jurisdiction (select all that apply):**

- Some misdemeanors
- All misdemeanors
- Some felonies
- All felonies
- I don't know
- Other/clarify: \_\_\_\_\_

**8. Please indicate the eligibility requirements for participants used by the VTC in your jurisdiction (select all that apply):**

- Honorable discharge
- Combat experience
- A nexus between current charge and military service
- No prior violent convictions
- Veteran had to be in prior treatment
- Veteran could not be in prior treatment
- I don't know
- Other eligibility criteria: \_\_\_\_\_

**9. Please indicate the approximate percentage of VTC-eligible veteran defendants you have represented that decline participation in VTC:**

- 0%
- 1-10%

- 11-20%
- 21-30%
- 31-40%
- 41-50%
- 51-60%
- 61-70%
- 71-80%
- 81-90%
- 91-100%
- I don't know

**10. What reasons have VTC-eligible veteran defendants offered as to why they do not wish to participate in VTC? Please list all known reasons:**

\_\_\_\_\_

**11. In your professional opinion, what are the reasons why VTC-eligible veteran defendants opt out of participation in VTC? Please list all the reasons you believe are responsible for non-participation:**

\_\_\_\_\_

**12. Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC?**

- No relationship  
Please explain your response: \_\_\_\_\_
- Weak relationship  
Please explain your response: \_\_\_\_\_
- Strong relationship  
Please explain your response: \_\_\_\_\_
- I don't know
- Other: \_\_\_\_\_

**13. What changes to the VTC in your jurisdiction do you believe would result in increased participation? Please provide an explanation for each proposed change:**

\_\_\_\_\_

Thank you for participating in this survey!

Your responses will be used to learn more about Veterans' Treatment Court and what can be done to enhance VTC participation. Thank you for all that you do in service of our military and your dedication to improving outcomes for veterans.

*For Prosecuting Attorneys*

**3. Do you have experience prosecuting military veteran defendants?**

- Yes (continue to question #4)
- No (exit survey)
- I don't know (exit survey)

**4. Please select which of the following best classifies the geographic area of the VTC in your jurisdiction:**

- Urban
- Rural
- Mixed urban and rural
- I don't know

**5. Please select which of the following best describes the VTC in your jurisdiction:**

- A track within a mental health court/docket
- A track within a drug court/docket
- Its own separate court/docket
- I don't know
- Other: \_\_\_\_\_

**6. Please select which of the following best describes the VTC in your jurisdiction:**

- Serves one county only
- Serves two or more counties as part of a multi-jurisdictional circuit
- I don't know
- Other: \_\_\_\_\_

**7. Please indicate the offense type(s) accepted by the VTC in your jurisdiction (select all that apply):**

- Some misdemeanors
- All misdemeanors
- Some felonies
- All felonies
- I don't know
- Other/clarify: \_\_\_\_\_

**8. Please indicate the eligibility requirements for participants used by the VTC in your jurisdiction (select all that apply):**

- Honorable discharge
- Combat experience
- A nexus between current charge and military service
- No prior violent convictions
- Veteran had to be in prior treatment
- Veteran could not be in prior treatment
- I don't know
- Other eligibility criteria: \_\_\_\_\_

**9. Please indicate the approximate percentage of veteran defendants your office encounters that decline participation in VTC:**

- 0%
- 1-10%
- 11-20%
- 21-30%
- 31-40%
- 41-50%
- 51-60%
- 61-70%
- 71-80%
- 81-90%
- 91-100%
- I don't know

**10. What reasons have VTC-eligible veteran defendants offered as to why they do not wish to participate in VTC? Please list all known reasons:**

- \_\_\_\_\_

**11. In your professional opinion, what are the reasons why VTC-eligible veteran defendants opt out of participation in VTC? Please list all the reasons you believe are responsible for non-participation:**

- \_\_\_\_\_

**12. Some studies suggest that veteran offenders experience difficulty reconciling their veteran and criminal identities. What relationship, if any, do you see between this conflict of identities and the decision to opt out of VTC?**

- No relationship  
Please explain your response: \_\_\_\_\_
- Weak relationship  
Please explain your response: \_\_\_\_\_
- Strong relationship  
Please explain your response: \_\_\_\_\_
- I don't know
- Other: \_\_\_\_\_

**13. What changes to the VTC in your jurisdiction do you believe would result in increased participation? Please provide an explanation for each proposed change:**

- \_\_\_\_\_

Thank you for participating in this survey!

Your responses will be used to learn more about Veterans' Treatment Court and what can be done to enhance VTC participation. Thank you for all that you do in service of our military and your dedication to improving outcomes for veterans.