2020

# Administrators' Experiences Implementing Veterans Housing Units in U.S. Correctional Institutions

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Walden University
2019

Abstract

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Institutions

by

Lori J. Riedel

M.Ed., Northern Arizona University, 2008

BS, University of Bridgeport, 2005

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Public Policy and Administration

Walden University

February 2020

Abstract

There is a higher rate of recidivism for U.S. veterans compared to the general population of offenders. To address the unique needs of veterans, separate housing units for veterans (VSUs) are now operating within correctional facilities in 29 U.S. states. Despite reports that VSUs are having a positive impact on recidivism, little is known of the experiences of correctional administrators who have implemented a VSU. The purpose of this qualitative phenomenological study was to explore the lived experiences of several individuals who have implemented a VSU in their correctional facility. Guided by the quality implementation framework (QIF), data collected through semistructured interviews conducted with 7 U.S. correctional administrators were analyzed by reducing the information to significant statements, when combined into themes provided a descriptive analysis. Results from this study affirm that implementing a VSU is a feasible option for many correctional administrators with the desire to address the needs of veteran offenders. Key findings indicate most steps taken to implement a VSU align with quality implementation. Additional results indicate that presently there may be less consideration for VSU implementation processes associated with quality in the areas of ensuring staff training to work with the veterans, and in conducting process evaluations including outcomes tracking. VSUs have a profound and nearly immediate, effect on veteran inmate behaviors and reducing recidivism. This examination of the phenomenon of VSU implementation may offer implementers with evidenced-based practices to advance understanding of VSU implementation in the future, ultimately to benefit veteran offenders and the communities in which they reintegrate.

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Dedication

This study is dedicated to all justice-involved veterans, regardless of whether in combat or not. They carry with them a military history and a sense of service to their country.

Acknowledgments

My first acknowledgment must go to my husband, family, and friends for their unwavering support through this long and demanding journey. Second, I would like to thank my chair, Dr. Carolyn B. Dennis. Without your understanding, guidance, and encouragement, I would not have completed this dissertation. It has indeed been a pleasure working with you this past year. I would also like to thank Dr. John M. Walker, who joined my committee during the approval stage of my proposal. Your suggestions and prompt feedback were much appreciated. Additionally, I want to thank Dr. Tamara Mouras, the university research reviewer; you helped me to produce a quality dissertation.

I also need to thank Sheriff Mark Lamb of Pinal County, Arizona, for providing me with this important topic and for all he and his team have done to give a fighting chance to veterans who have lost their way. Additionally, I must thank all the kind corrections practitioners who graciously gave so freely of their time, trust, and expertise while sharing their honest experiences.

Finally, I would like to thank Dr. Joyce Moses Jones for seeing my fear and lifting me with her spirit and kindness all those years ago; you have been a real godsend and an inspiration ever since. Lastly, thank you to Dr. Don Altman for telling me to "just finish it!" It is PhinisheD!

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Chapter 1: Introduction to the Study

**Introduction**

Veterans currently make up between 8% and 10% of the U.S. incarcerated population (Blonigen et al., 2017; Edelman, 2018; Snowden, 2017). The total population of those incarcerated in the United States is currently 2.2 million (Pew Research Center, n.d.), and veteran inmates account for approximately 200,000 of U.S. totals. Data from justice programs show that the veterans they encounter have a lifetime average of eight arrests (Blonigen et al., 2013), suggesting that many veterans are caught in a cycle of recidivism. Furthermore, of the 1.5 million veterans who returned home after 9/11, as many as 300,000 active duty service members suffer from traumatic brain injury, post-traumatic stress disorder (PTSD), and/or mental health and substance abuse disorders (Hawkins, 2009; White, Mulvey, Fox, & Choate, 2012). Justice-involved veterans often exhibit illegal and violent behaviors, co-occurring with issues of mental health and substance abuse. This complexity of challenges places veterans at a higher risk for incarceration than the general population (Baldwin & Ruckis, 2015; Lucas & Hanrahan, 2016).

For over 30 years, punitive justice theories expressed through tough-on-crime policies were prominent in the United States (Boppre, Sundt, & Salisbury, 2018; Rhine, Mawhorr, & Parks, 2006; Viglione, Rudes, & Taxman, 2015). These policies resulted in mass incarcerations, peaking in 2008, with over 2.3 million behind bars (Pew Research Center, n.d.). Evidence has confirmed that correctional systems devoted solely to punishment are ineffective and costly and can have a criminogenic effect (Nagin, Cullen,

& Jonson, 2009; Rhine et al., 2006; Vander Waal, Taxman, & Gurka-Ndanyi, 2008).

Previous correctional models have not been proven effective in decreasing the percentage

of veterans behind bars (Blonigen et al., Rhine et al., 2006; Seamone et al., 2014). As a

result, there is now interest in program models focused on correctional rehabilitation

(Andrews et al., 1990; Boppre et al., Cullen & Gendreau, 2000), and evidence-based

programming (Mackenzie, 2005; Taxman, 2008; Viglione et al., 2015).

The primary mission of rehabilitative corrections is to address the underlying

problems that contribute to offender behaviors (Arno, 2014; Boppre et al., 2018, Taxman,

2008). Rehabilitative theories are prominent in the current literature on specialized

programming for justice-involved veterans (Baldwin, 2015; Lucas & Hanrahan, 2016;

Tsai & Goggin, 2017; Seamone et al., 2014). Principles of rehabilitation integrated into

prison programming feature components of both restorative and therapeutic justice.

Examples of restorative justice include offender accountability, such as paying restitution

and community involvement, such as offering fellow veterans peer support and

volunteering (Baldwin, 2015; Schwartz & Lavitas, 2011). Examples of therapeutic justice

involve a multidisciplinary approach focused on the cognitive aspects of an individual,

such as anger, family relationships, psychological and social health, substance abuse,

education, and job training (Andrews & Bonita, 2010; Lucas & Hanrahan, 2016; Tsai &

Goggin, 2017).

Experts contend that there will be no meaningful improvements until

rehabilitative models are adjusted to address the complex needs of justice-involved

veterans (Seamone et al., 2014; Timko et al., 2014; Tsai & Goggin, 2017). Treatments

developed for the general population require modification because the needs of justice-involved veterans are different from those of the general justice-involved population (Arno, 2015; Russell, 2009; Timko et al., 2014). The recognition that veterans are a distinct and culturally diverse population has spurred a call to update how veteran offenders are treated (Albertson, Banks, & Murray, 2017; Edelman, 2018; Timko et al., 2014). Requests by many to upgrade the standard of care for justice-involved veterans has resulted in the emergence of two innovative programs that are tailored to address the needs of veterans: veteran service units (see Tsai & Goggin, 2017) and veterans treatment courts (see Russell, 2009).

A veteran service unit (VSU) is a specialized program designed to address the unique needs of justice-involved veterans remanded to jail or prison. Implementing a VSU involves creating a separate physical space within a correctional facility where incarcerated veterans reside to interact daily while receiving programming responsive to their unique needs (Edelman, 2018; Rosenthal & McGuire, 2013; Seamone, 2019). In alignment with recently embraced rehabilitative programming, the purpose of a VSU is to transform destructive behaviors while acknowledging the inmate's military service through the infusion of comradery and accountability (Edelman, 2018; Goggin, Mitchell, & Tsai, 2018; Tsai & Goggin, 2017). The goal is to assist formerly incarcerated veterans with successful reintegration into society.

Like VSUs, veterans treatment courts (VTCs) are also used to address the unique needs of veteran offenders through interventions tied to military strengths and principles, which are implemented earlier in the veterans' involvement with the criminal justice

system (Blue-Howells, Clark, van den Berk-Clark, & McGuire, 2013; Edelman, 2018; Timko et al., 2014; Tsai & Goggin, 2017). Modeled after the success of other problem-solving courts (Cavanaugh, 2010; Knudsen & Wingenfeld, 2016; Russell, 2009), VTCs are intended to connect veteran offenders with services and treatments instead of incarceration (Baldwin, 2015; Crane, Schlauch, & Easton, 2015; Huskey, 2017). Participating in a VTC program is voluntary. Once approved for the program, veterans who come before a VTC judge are held to a higher degree of commitment and accountability than is typically expected in traditional criminal courts (Baldwin & Rukus, 2015). Additionally, VTCs provide a combination of veteran peer support, integration of services, and a philosophy of treatment rather than punishment (Huskey, 2017; Seamone et al., 2014; Tsai & Goggin, 2017)

## Background of the Study

Since 2010, the phenomenon of VSU implementation has gained momentum in the United States (Seamone, 2019). According to a recent report, there are 122 VSUs operating in 30 states (National Institute of Corrections, n.d.) with more in development (National Sheriffs Association [NSA], n.d.). The limited number of studies on VSUs have indicated promising outcomes, including a dramatic reduction in veteran recidivism (Schwartz & Levitas, 2011; Goggin et al., 2018; Tsai & Goggin, 2017). However, no qualitative studies have been conducted thus far on operating VSUs. Additionally, researchers have not explored the phenomenon of VSU implementation through a theoretical framework developed to identify evidence-based practices with data from those who have experienced implementing a VSU.

Three noteworthy but anecdotal reports provided information on the implementation of VSUs for those working with veteran inmates. The purpose of the first report by the U.S. Department of Veterans Affairs was to affirm the success of and report on the progress of their veterans-outreach programs in addressing the issues veterans often face (e.g., psychological, social, health, legal). The report included praise for VSUs' potential to facilitate the management of incarcerated veteran clients when they are housed together and engaged in programs focused on reentry, along with interviews from a handful of VSU administrators who shared their VSU implementation experiences (Blue-Howells et al., 2013). The report concluded that despite the tremendous support and repeated calls for replication the VSU model has received, comprehensive, evidence-based evaluations for implementation strategies and prescriptive practices remain lacking (Blue-Howells et al., 2013).

Another report released in 2018 by the National Institute of Corrections (NIC) featured five VSUs operating in various jails across the United States. The NIC report was a comprehensive white paper modeled after a well-received white paper on VTCs. The report provided narrative accounts of VSU implementation experiences collected from a purposeful sampling of individuals who were directly involved in the development, implementation, and administration of VSUs (Edelman, 2018). This report provided insights into the success of the VSU phenomenon and offered practical considerations for those interested in implementing a VSU within their jail.

Seamone (2019) examined the variety of approaches available to address the needs of justice-involved veterans. Regarding VSUs, Seamone noted that correctional

facilities have an opportunity to provide specific and effective interventions aimed at ending the cycle of recidivism and promoting the reintegration of justice-involved veterans as productive members of society. Seamone explained that the VSUs currently in operation in the United States "emerged from necessity in the absence of readily available data…the implementation process was practical rather than scientific or academic" (p. 290). However, Seamone concluded that there is a "preoccupation with evidence-based approaches" (p. 290) and suggested that if correctional professionals desire correctional treatment, they need to designate a space and staff in their facility to house veteran inmates, paint the walls with military insignias, and invite groups from the community to share information to help veteran inmates reach their goals.

Seamone (2019) addressed the benefits of specialized correctional programs for veterans and, along with the comprehensive reports provided by the VA and the NIC, made valuable contributions to understanding the VSU phenomenon propagating across the United States. However, these publications did not provide philosophically grounded research and reliable data that are required by those in a position to advance practical policies and programs. In addition to Seamone, others in the correctional field are requesting empirical studies on rehabilitative correctional programs to substantiate the positive outcomes they are witnessing. Evidence-based approaches may offer numerous benefits to correctional specialists involved with implementing correctional programs, as well as the recipients of quality interventions (Blue-Howells et al., 2013; Boppre et al., 2018; Goggin et al., 2018; Mackenzie, 2005; Taxman, 2008; Tsai & Goggin, 2017; Viglione et al., 2015).

**Problem Statement**

In the United States, over 122 VSUs have been implemented within correctional facilities in at least 30 states since 2010 (NIC, 2019). Despite the relatively rapid diffusion of this specialized correctional model over the past decade and the significant attention VSUs have received in the media and in reports from governmental organizations (Edelman, 2018), there has been very little empirical research conducted on the VSU correctional model. At the time of the current study, there had been two studies published on the VSU model (Goggin et al., 2018; Tsai & Goggin, 2017). Tsai and Goggin (2017) concluded that "there is great potential for VSUs to address the needs of incarcerated veterans" (p. 47). Goggin et al. (2018) noted that "there is a unique opportunity for state department of corrections (DOCs) to partner with other relevant stakeholders in the community to implement evidence-based programming" (p. 401).

A gap exists in understanding the experiences of those who have implemented the VSU model in the United States. Also, the factors that influence administrators as they implement veteran units are not well understood. Despite early reports of the VSU models' success with community reintegration and decreased recidivism for veterans who participated in these specialized programs (Blue-Howell et al., 2013, Edelman, 2018; Goggin et al., 2018; 2018; Seamone, 2019; Tsai & Goggin, 2017), no studies have been undertaken to understand the phenomenon of VSU implementation. Seamone (2019) observed that the VTC model shares an identical philosophy with the VSU model. Therefore, studies on the VTC model addressing how the phenomenon of specialized programming for justice-involved veterans has been applied were included in the

literature review in the current study. VTCs have been widely studied since emerging as the specialized court program developed to address the unique needs of justice-involved veterans (Baldwin & Rukus, 2015; Blonigen et al., 2016; Seamone et al. 2014; Timko et al., 2014).

To contribute to the understanding of the VSU implementation process, the current study focused on VSU implementation experiences shared by correctional administrators with firsthand knowledge of the phenomenon. Gaining understanding and insights into the VSU implementation experience and the circumstances that influenced the implementation experiences, as viewed through the lens of the quality implementation framework, provided insight into evidence-based implementation practices with the potential to inform future development of quality VSUs in correctional facilities.

## Purpose of the Study

The purpose of this qualitative phenomenological study was to explore the implementation experiences of those who had developed a VSU within a U.S. correctional facility since 2010. Data for this study were obtained through in-depth interviews conducted via telephone on dates and times that were convenient to the participants. The recorded and transcribed interview data were analyzed with Quirkos software.

## Nature of the Study

The nature of this study was qualitative with a phenomenological design. A phenomenological design should be considered when it is important to understand the common experiences involved with developing practices and policies (Creswell, 2013).

To gain insight into the common experiences and practices implemented by early developers of the VSU model, I conducted a phenomenological study to discern the lived experiences of VSU implementers. This approach allowed for close contact with the stories of individuals and provided a broader scope than that derived from a singular situation presented as a case study (see Rudestam & Newton, 2015).

To capture the essence of VSU implementation as a single concept yet allow for the interpretation of the multiple experiences involved in VSU implementation, I used a transcendental phenomenological design (see Moustakas, 1994). The transcendental method is predicated on following a series of steps that include collecting data from several individuals who have experienced the phenomenon, analyzing the data by reducing the information to significant statements, and combining those statements into themes (Creswell, 2013). The themes were interpreted to gain a deeper knowledge of the shared experiences of implementers. Additionally, the phenomenon was refined with the quality implementation framework to convey the essence of VSU implementation through the perspective of implementation science (see Creswell, 2013; Meyers, Durlak, & Wandersman, 2012).

### Theoretical Framework

The theoretical framework that guided this study was the quality implementation framework (QIF). The QIF is derived from Rogers's (1995) diffusion of innovation theory. Rogers identified five crucial stages in the diffusion of innovation within social settings; the process of implementation is the fourth stage. The QIF extends diffusion theory through a synthesized metaframework that offers four action-oriented

implementation phases linked to quality improvements: initial considerations regarding the host setting, creating a structure for implementation, ongoing structure once implementation begins, and improving future application (Meyers et al., 2012). A thorough discussion of the QIF phases and how they correspond to quality VSU implementation is included in Chapter 2 of this study.

Several researchers noted that implementation theories and frameworks share an overreaching aim to address implementation challenges to guide and implement practice (Carroll et al., 2007; Moullin, Sabater-Hernández, Fernandez-Llimos, & Benrimoj, 2015; Nilsen, 2015). However, QIF goes beyond useful suggestions by presenting a framework focused on providing a blueprint created for the action of implementation (Meyers et al., 2012). Viewing the implementation actions taken by early developers of the VSU model through the lens of the QIF provided insights into implementation experiences closely associated with quality outcomes. Moreover, QIF provided practical, evidenced-based implementation processes for future application.

## Research Questions

This study was guided by two research questions (RQs):

RQ1: What have correctional administrators experienced in terms of implementing a veteran service unit?

RQ2: What context or situations influenced or affected correctional administrators' experiences as they implemented their veteran service unit?

## Assumptions

The first assumption was that correctional administrators would want to understand the experiences of those who have implemented VSUs and would want to follow strategies associated with improved outcomes. The extent to which correctional administrators care about VSU implementation strategies may be related to the number of veteran inmates housed in their correctional facility, the amount of facility space available, administrators' level of freedom to make policy change decisions, and administrators' military experience. Due to the phenomenological nature of this study, there was a philosophical assumption that the experiences conveyed by the VSU implementers reflected their reality as expressed through key words and phrases used to identify the qualitative themes.

## Limitations

This study was limited to understanding the experiences of those who had implemented a VSU within a U.S. correctional facility. Because there are currently no VSUs that have been implemented for female inmates, the findings were restricted to VSUs that house male veteran inmates only. Additionally, the responses to the interview questions were self-reported by the participants in the study; therefore, there was a possibility of recall bias. Lastly, the study's findings were limited to VSUs housed within departments of correction that agreed to grant me permission to conduct interviews with their employees.

**Definition of Terms**

*DD Form 214*: The capstone military service document that represents the complete, verified record of a service member's time in the military, active and reserve (VA.gov, 2019).

*Health Care for Re-entry Veterans Services (HCRV)*: A program overseen by the VA that is designed to promote success and prevent homelessness among veterans returning home after incarceration (VA, n.d.). Services are provided by HCRV field-based specialists who function as both program coordinators and clinical service providers (Blue-Howells et al., 2013).

*Justice-involved veterans:* U.S. military veterans detained by or under the supervision of the criminal justice system (Blonigen, 2016).

*Recidivism*: A term that encompasses rearrests, reconvictions, or re-incarcerations for a new crime or violation of the terms of one's parole or probation (McCall, Rodriguez, Barnisin-Lange, & Gordon, 2019).

*Sequential Intercept Model (SIM)*: An intervention framework developed by Munetz and Griffin (2006) that has been adopted by the VA to offer services to veterans at multiple points along the criminal justice system continuum (Blue-Howells et al., 2013).

*Veterans Justice Outreach (VJO)*: A program aimed at avoiding unnecessary criminalization of mental illness and extended incarcerations among veterans by ensuring that eligible, justice-involved veterans have timely access to Veterans Health

Administration services. VJO services are provided through VJO and HCRV field specialists (VA, n.d.).

*Veterans justice outreach specialists*: Trained field caseworkers who function as both program coordinators and service providers for direct outreach, assessment, and case management for justice-involved veterans in local courts and jails and who serve as liaisons with local justice system partners (VA, n.d.).

*Veterans service units (VSUs)*: Correctional facility dormitories for veterans that have been implemented to assist with community reintegration and connecting veterans to medical and mental health services (Goggin et al., 2018).

*Veterans treatment courts (VTCs)*: Specialized courts modeled after the success of other problem-solving courts such as drug and mental health courts. VTCs are predicated on addressing the underlying cause(s) of the criminal behavior by connecting veteran offenders with services and treatments in lieu of incarceration (Russell, 2009).

## Significance

Flick's (2018) statement that "rapid social change forces us to make use of inductive strategies" (p. 30) aptly describes the current state of the VSU implementation phenomenon in the United States. Currently, the VSU model appears to be disseminated from state to state through a network of formal and informal gatherings where best practices are shared. The current study provided insight into the essence of the VSU implementation experience. Using the QIF (see Meyers et al., 2012) to view the phenomenon allowed me to identify deductive strategies that can bridge the gap between the science and practice of VSU implementation.

The results of this study may provide correctional administrators with insight into evidence-based implementation strategies that may be used in the future development of VSUs. Findings may also increase the likelihood that more VSUs will be implemented to provide justice-involved veterans with increased access to programs focused on their needs. This study was intended to benefit the communities in which veterans reintegrate after serving their time in a specialized housing unit, and to improve the quality of life for U.S. veterans.

## Summary

Veterans account for approximately 200,000 of the total population of those currently incarcerated in the United States (Blonigen et al., 2017; Edelman, 2018; Snowden, 2017). Often as a result of their military service, veterans face a complex set of challenges that place them at a higher risk for incarceration than the general population. Additionally, veterans have a higher than average rate of recidivism (Blonigen et al., 2013).

Specialized programming implemented to address the unique needs of justice-involved veterans is showing positive results (Tsai & Goggin, 2017). The VSU model was developed to address the unique needs of veterans who become incarcerated (Seamone, 2019). The most recent count of VSUs indicated that there are more than 120 VSUs currently operating in correctional facilities in the United States (National Institute of Corrections, 2019). The emergence of the VSU phenomenon appears to have occurred primarily through the dissemination of informal communications between leaders within

the national corrections community and through the sharing of best practices at law

enforcement conferences. Consequently, the implementation of VSUs has been random.

Despite the tremendous support VSUs have received and calls for more to be

implemented that are based upon evidence from the criminal justice and correctional

sectors, little empirical research has been done. In this phenomenological study, I sought

to understand the experiences of those who had implemented a VSU and the factors that

influenced them during the implementation process. Chapter 1 presented an overview of

the study and insights into the theoretical framework and methodology used to conduct

the study. Chapter 2 presents a review of current literature on the implementation of

specialized programs for justice-involved veterans.

Chapter 2: Literature Review

**Introduction**

In Chapter 2, the social science, public policy and administration, and the criminal justice literature are reviewed. A need was identified for continued research to understand the implementation of veteran service units within correctional facilities. Studies addressing the unique challenges faced by justice-involved veterans and the impact those challenges have on society are now prevalent. Current literature on the topic of the unique challenges faced by returning veterans who become justice-involved, and programs designed to address those problems, have focused on two recent phenomena with identical philosophies: the implementation of specialized veteran dockets, referred to as veterans' treatment courts (VTCs), and the implementation of specialized housing units for veterans within correctional facilities, referred to as veterans' service units (VSUs).

There is now an extensive body of literature on the implementation of VTCs. Although the body of literature on the implementation of the VSU model does not appear to be far behind, it is emergent in comparison to the number of studies on VTCs. Within the existing literature on the implementation of the VTC and VSU models, researchers have attested to their shared paradigm and a desire for an even greater complimentary association between the models. This close connection between the VTC and VSU implementation models has enabled the broadening of the foundational literature to support the research on the implementation of VSUs.

The review begins with a description of the search criteria, conceptual framework, and methodology used to support this qualitative inquiry. The next section addresses the current literature on specialized models developed to address the unique needs of justice-involved veterans. This review also addresses the presence of implementation science within correctional programming research, and the impactful role quality plays in the development of correctional programs for veterans.

## Search Criteria

An inquiry was conducted based on peer-reviewed journals, data from governmental and military organizations, books, and personal communications. The databases included Political Science Complete, CQ Researcher, Criminal Justice Database, Federal Agency Participation, Soc INDEX with Full Text, Bureau of Justice Statistics, and Military and Government Collection. Key words and phrases used as search terms included *incarcerated veterans*, *veteran-specific units*, *veteran treatment courts*, *justice-involved veterans*, *prison programming*, and *program implementation*. Literature presenting empirical findings and substantive discourse on topics related to programs for justice-involved veterans guided the selection for review. The data presented in this review were analyzed using a literature matrix that outlined each source's research question, theories, methodology, design, sample population, analysis, findings, and recommendations for future studies.

## Theoretical Framework

The quality implementation framework (QIF) has emerged as an expansion of current implementation frameworks with a primary focus on theories of process. QIF

employs critical action steps associated with improvements to the quality of a program, especially during the development and implementation phases. QIF organizes the implementation steps into four major phases: initial consideration, creating a structure, ongoing structures, and improving future applications (Meyers et al., 2012). The framework presented a standard for understanding the implementation experiences of VSU adopters and served as a guide for practical application, aligned with total quality improvement, to improved program outcomes.

The QIF provided the foundation to extrapolate the experiences and processes used by early adopters of VSUs within correctional facilities. The versatility of the QIF allows for use across disciplines while providing constructive guidance for implementing innovative programs (Meyers et al., 2012). The QIF emphasizes the importance of including evidence-based instruction for practical application as a means of improving outcomes (Meyers et al., 2012). Born out of a synthesis of the current and emerging implementation frameworks (Damschroder et al., 2009; Durlak & Dupre, 2008; Greenhalgh, Robert, MacFarlane, Bate, & Kyriakidou, 2004; Rycroft-Malone, 2004; Wandersman et al., 2008), application of the QIF enhances the structures and functions most closely associated with improving the quality of programs (Meyers et al., 2012).

The QIF stems from Rogers' (2003) diffusion of innovation theory. Rogers identified the stages involved in the diffusion of innovation within social settings, and which features the process of implementation as the fourth of five crucial stages. Similarly, the QIF extends the implementation component of diffusion through a synthetized metaframework that offers four action-oriented phases of implementation

closely linked to improvements in quality: initial considerations regarding the host setting, creating a structure for implementation, ongoing structure once implementation begins, and improving future application (Meyers et al., 2012).

There is a considerable body of implementation science literature across a variety of disciplines (Bozeman, 1993; DeLeon, 1999; Durlak & Dupre, 2008; Mazmanian & Sabatier, 1983; O'Toole, 2004; Signé, 2017) including several studies featuring correctional programming explored through various implementation theories. Despite differences in chosen methodologies, there is agreement among researchers in the corrections field that a focus on quality, especially during implementation, will guide program outcomes favorably (Lowenkamp, Latessa, & Smith, 2006; Mackenzie, 2005; Miller & Miller, 2015; Rhine et al., 2006).

Prior to Meyers et al.'s (2012) introduction of the QIF, a theory for program implementation had not been offered with as robust a prescription for ensuring quality (Signé, 2017). The QIF is derived from recognizing quality as a critical aspect in the success of innovative systems and programs. The framework was born out of an expansion of Wandersman et al.'s (2008) interactive systems framework for dissemination and implementation. The QIF is founded on a comprehensive synthesis of implementation research amassed from multiple disciplines (Hupe, 2014; O'Toole, 2004; Signé, 2017; Smith, 2018). The theory posits that a framework based on meta-analysis grounded in evidence and focused on action will provide a blueprint for practical application (Hupe, 2014; Meyers et al.; O'Toole, 2004; Signé, 2017). Viewing implementation actions through the lens of the QIF yielded insight into VSU

implementation experiences associated with instructional and duplicable outcomes (Meyers et al., 2012; Signé, 2017; Smith, 2018), particularly when compared to previous correctional program implementation science models such as top-down, bottom-up, and process evaluation (Astbury, 2008; Miller J.M. & Miller H.V., 2015; Welsh, Farrington, & Gowar, 2015). Looking at VSU implementation through the framework of implementation quality offered evidenced-based and practical utility to advance understanding of VSU implementation.

The QIF posits that successful and innovative implementation consists of 14 steps that are divided into four progressive phases. When these steps are systematically coordinated before, during, and after implementation, the likelihood of attaining program quality increases (Meyers et al., 2012). When the decision is made to employ the QIF, those responsible for the success of a program's implementation must recognize the need to remain structured yet flexible. Also, the process is dynamic but dependent on following the steps in a specific order and maintaining the expectation that certain phases may need to be revisited (Fixsen & Fixsen, 2016; Meyers et al., 2012; Signé, 2017). Figure 1 provides a diagram depicting the specific and fluid natures of the QIF.
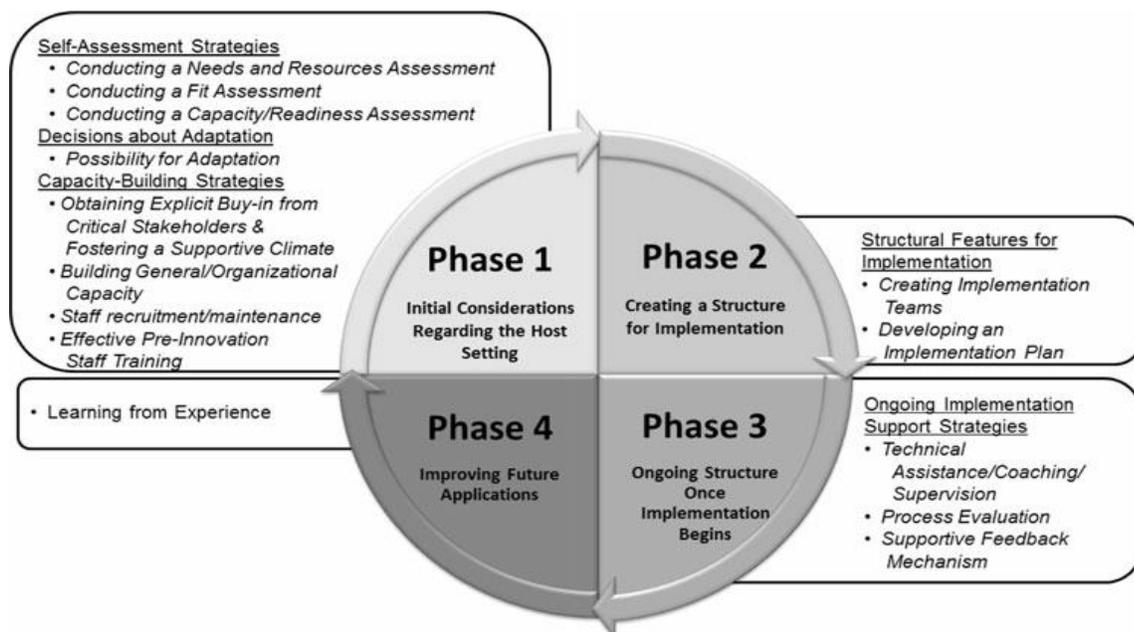
*Figure 1*. Diagram of the quality implementation framework. The model depicts the dynamic interplay among critical steps of QIF (Meyers et al., 2012, p. 475).

The QIF provided the theoretical lens through which to explore the implementation processes of VSUs. In addition to common themes compiled from within the literature review, the 14 steps of the QIF guided the construction of the interview questions posed to adopters of the VSU model. Through the application of the QIF steps, additional insights into the implementation actions most closely associated with quality outcomes were revealed.

## Justice-Involved Veterans

The number of veterans in U.S. prisons and jails is estimated to be approximately 9% of the total incarcerated population according to the 2011-12 special report by Bronson, Carson, Noonan, and Berzofsky (2015). Several demographic surveys showed that most incarcerated veterans are men (98%), older, educated, White, and likely to have

been married (Bronson et al., 2015; Edelman, 2018; Schaffer, 2009; Tsai & Goggin, 2017). Despite census data, researchers have not been able to establish a prototype of a veteran offender. Characteristics of veteran offenders are diverse for several reasons (Greenberg & Rosenheck, 2012; Seamone, 2019). One factor associated with an increased risk for veterans to become incarcerated relates to when and how they joined the military. Over different periods of time in U.S. history, societal conditions have affected military recruiting practices (Green & Rosenheck, 2012). Today it is not uncommon for a 66-year-old Vietnam veteran inmate, drafted in 1972, to be serving time with a 36-year-old veteran who voluntarily enlisted in 2005 for Operation Iraqi Freedom. If researchers were to explore the events leading up to veterans' most recent incarceration, they would find some commonalities but would also find several surprising differences. One difference involves the underlying causes attributed to an individual veteran's mental health issues and their military cohort (Green & Rosenheck, 2012).

## The Veteran Experience (1969-2019)

Most military members who served during the Vietnam era were born before the start of the baby boomer generation (1945). Perhaps due to the limited population of potential recruits, there was a decrease in the number of rejections by the military for physical and educational deficiencies. Additionally, deferments and exemptions during the Vietnam War allowed better-educated men to avoid military service (Green & Rosenheck, 2012). Then, in the summer of 1973, the U.S. government instituted an all-volunteer force (AVF) that led to further recruitment difficulties (Griffith, 1997). These

difficulties were primarily caused by the unpopularity of the military at the time and the prospect of less pay compared to civilian jobs.

Those who enlisted under the new AVF policy tended to come from a lower socioeconomic background, which meant they were less likely to have graduated from high school, tended to have lower aptitude scores, and were more likely to have had problems with substance abuse (Green & Rosenheck, 2012). With this dismal recruiting outlook, it is not surprising that audits conducted during the 1970s indicated that recruiters engaged in activities such as coaching recruits on entrance exams and performed less than thorough medical and criminal background checks (Rostker & Yeh, 2006). As a result, military ranks were composed of a large number of soldiers who were ill-prepared to handle the stresses and traumas of war.

A study conducted on almost 7000 veterans, designated the population of veteran research participants into the following categories: Vietnam era draftees; voluntarily enlisted veterans; and non-incarcerated veterans. The researchers found that those who served during the early years of the AVF were significantly more likely than Vietnam veterans to be incarcerated compared to their nonveteran peer groups. The study's findings suggested that the variation in a veteran's risk of incarceration has an association with the military recruiting patterns and standards of their military cohort (Green & Rosenheck, 2009; 2012). Since the mid-1980s, the quantity and quality of military recruits have improved as a result of toughened educational standards and a government mandated "zero tolerance" policy toward illicit drug use (Griffith, 1996; White, 2004). Additionally, from the 1980's to the mid-1990's the percentage of recruits given waivers

for having a criminal background decreased by approximately half (Green & Rosenheck, 2012). Data from the most recent U.S. report corroborate the diversity of military cohorts among incarcerated veterans. Of the 41% of incarcerated veterans who indicate that they have experienced combat, 23% state they saw combat in Vietnam, 30% in Iraq/Afghanistan, and 47% other (e.g., the Persian Gulf, Balkans, Somalia, and Nicaragua) (Bronson et al., 2015). This also means more than half (59%) of incarcerated veterans in the U.S have not experienced combat (Bronson et al., 2015).

It may be tempting for civilians to oversimplify the complex relationship between combat experience, trauma, and mental health issues such as PTSD. However, it is important to understand that all members of the military share experiences that are not common among civilians. Whether conscripted or enlisted, experienced combat or not, serving in the military means preparing for repeated exposure to potentially traumatic and life-threatening events (Hawkins, 2009; Morgan, Logan, & Cullen, 2018; Rosenthal & McGuire, 2013; Seamone, 2019). Of the entire U.S. population of incarcerated veterans, 63.5 % of those indicating they had combat experience were given a mental disorder diagnosis at some point in their lives. An average of 46.5% of incarcerated veterans who indicated they had not been in combat were given a mental disorder diagnosis at some point in their lives (Bronson et al., 2015). Consequently, mental health issues, regardless of origin, are a significant risk factor associated with veteran incarceration (Greenberg & Rosenheck 2009; Morgan et al., 2018; White, Mulvey, Fox & Choate, 2012).

Most U.S. veterans (over 90%) are law-abiding, well-adjusted contributing members of society (Seaomone, 2019). Moreover, there are elements of military training

and service that are positively associated with a veteran's ability to readjust to civilian life. Military service is known to foster reliance on a team rather than an individual's accomplishments to get jobs done. Being adept at performing as a member of a group is a desired and sought-after skill with many employers. Nevertheless, it is still of great concern that one's status as a veteran is directly correlated to an increase in the likelihood of abusing drugs and alcohol, getting arrested, becoming incarcerated, and more than likely rearrested (Edelman, 2018; Goggin et al., 2018; Morgan et al., 2018).

A veteran's ability, or lack of ability, to successfully integrate back into civilian life after leaving the military has been associated with several military-related characteristics such as, having a warrior mentality, which tends to reject asking for help, and being in a constant state of wariness for reasons of self-preservation. Additionally, while serving in the military one typically does not have many financial obligations. The military provides a place to live, food to eat, and clothes to wear to remove daily living concerns and allow a service member to better focus on warrior tasks. Conversely, providing for one's own needs and making life decisions is an important part of human growth and maturity. As a result, service members may not have fully developed in this area due to their reliance on the military (Seamone, 2019).

As stated, the Vietnam era veteran's mental health issues are often tied to factors not necessarily experienced by those who served in more recent conflicts. In part, this is due to the less than glorious reception they received when coming home. The negative homecoming many received substantially impacted the lives of Vietnam veterans, and for many, contributed to symptoms of PTSD and other mental disorders (Boscarino, 2006;

Shein, 2010; Steenkamp et al., 2017). The Vietnam War also differed from other wars in that it was politically controversial, morally questionable, and ended in defeat (Wagner-Pacifici & Swartz, 1991). Vietnam veterans report being shamed or ignored and blamed for the poor outcome of the war (Johnson et al., 1997; Vietnam Veterans of America, 2019). Heated arguments within the U.S. over military involvement in Vietnam kept many people from welcoming veterans or recognizing their service in contrast to more recent receptions experienced by veterans of Desert Storm, Operation Enduring Freedom (OEF), and Operation Iraqi Freedom (OIF) (Dougan & Weiss, 1988; Seamone, 2019).

Vietnam veterans were also the first military cohort in the U.S. to be sent home almost immediately following their last battles via jet airplane. As such, there was little to no adjustment period. Many Vietnam veterans also had no one to share their experiences because of the attitudes at home about the war. Those who attempted to get help with adjustment issues found their options limited because of extremely limited benefits (Steenkamp et al., 2017, Vietnam Veterans of America, 2019). At the time, veterans received just $200 per month; barely enough to cover living expenses, let alone get an education, of which the majority lacked (Seamone, 2019). If a veteran did seek treatment, many would find inadequate facilities and a lack of professional understanding. It is not surprising that many Vietnam veterans resisted looking to the government for help (Shein, 2010, Vietnam Veterans of America, 2019; Veoegle, 2016).

Added to the cold welcome and lack of assistance, returning Vietnam veterans came home to find the U.S. experiencing the highest inflation and interest rates in over 100 years, which was attributed to the increase in spending to fund the war (Riddell,

1970). With approximately 250,000 Vietnam veterans unable to find jobs upon returning home, many desperate veterans turned to crime and eventually found themselves added to the 25% of Vietnam veterans who were arrested within 10 years of coming home (McFall, Mackay, & Donovan, 1992; Seamone, 2019).

A longitudinal study conducted over 25 years, examined predictors of PTSD in Vietnam veterans found that out of 22 predictors, sorted by 'prewar factors', 'war-zone factors', and 'postwar factors', the highest predicators of PTSD over a life-span included lower education levels, perceived poor homecoming reception, and perceived poor social support (Steenkamp, et al., 2017). Another study conducted on 247 Vietnam veterans, participating in a four-month intensive treatment program, found that the most significant predictor of PTSD was homecoming stress, even more so than combat exposure, which was second, followed by childhood and civilian traumas, and stressful life events (Johnson et al., 1997; Kulka et al., 1990). Homecoming stress is comprised of feelings of shame, negative interpersonal interaction, social withdrawal, and feelings of resentment (Johnson et al., 1997).

The Vietnam War resulted in a significant increase in the number of veterans returning to the United States with PTSD or suffering from problems relating to PTSD which in turn, impacted the criminal justice system. According to Schein (2010) "almost half of all male Vietnam theater veterans currently suffering from PTSD have been arrested, or have been in jail at least once, 34.2% more than once, and 11.5% convicted of a felony" (p. 44). Furthermore, the exact number of Vietnam veterans who have committed suicide after the war cannot be determined, but some estimate that as many as

100,000 Vietnam veterans have ended their lives (Hearst & Hulley, 1986). Alcohol abuse among male theater veterans is also at nearly 40%, three times that of the general population. Also, the estimated lifetime prevalence of drug abuse among male Vietnam theater veterans is almost 6%, which is five times that of the general population (Schein, 2010).

In the early 1980s, several events occurred in succession which enabled the country to ask why they had not honored Vietnam veterans for their service. The first event occurred in 1980 when PTSD was recognized as a formal diagnosis (Seamone, 2019). This change opened the door for some sufferers to petition the government for mental health care (Voegele, 2016). Next, in January of 1981, the American hostages being held in Iran returned home to welcoming parades (Vietnam Veterans of America, 2019). Then, on Veterans Day 1982, as part of the Vietnam Veterans Memorial commemoration, hundreds of thousands of Americans applauded an estimated 15,000 veterans as they went by on floats in a grand parade (Wagner-Pacifici & Schwartz, 1991). The shameful attitudes Americans projected on to returning soldiers began to turn around a painful moment for society. Today, we continue to try and make Vietnam veterans whole, including those within our courts and correctional institutions.

A founding principle of the advocacy group, Vietnam Veterans of America is 'Never again will one generation of veterans abandon another' (Vietnam Veterans of America, 2019). As such, those who served in more recent wars (e.g., Persian Gulf, Iraq, Afghanistan) have benefited somewhat from the advocacy efforts of their Vietnam veteran counterparts (Vietnam Veterans of America, 2019). Painfully aware of America's

legacy of being unsupportive and critical of its troops during the Vietnam War, any criticisms during the Gulf War pointedly steered blame away from the troops. There was enormous cultural pressure in the U.S. to rally around the flag with yellow ribbons (Coy, Woehrle, & Maney, 2008). By the time the Iraq War began, sentiments of 'support our troops' and 'thank you for your service' were embedded in American culture.

A study examining the impact of homecoming experiences on returning soldiers found when comparing Vietnam veterans' perception of low homecoming support (44.3%) to recent era veterans' perceptions of low homecoming support (26%), there was substantial improvement (Adams et al., 2019). On the other hand, troops serving in conflicts post 9/11 have endured more deployment cycles and longer time in actual combat than in any other U.S. military conflict (Ungvarsky, Conaty & Bellflower, 2012). The VA estimates that the post-9/11 veteran population will be at just under 3.5 million by 2019 (VA, 2016). In 2002, 41% of all (OIF/OEF) veterans eligible for VA healthcare had enrolled. This is historically high for the VA when in comparison just 10% of Vietnam veterans enrolled (Seal et al., 2009). VA enrollment is important because it is necessary to capture veteran mental health treatment data. Of the first 100,000 post-9/11 veterans to be seen at the VA, 25% received mental health diagnoses (Seal et al., 2009).

Diverse military histories aside, justice-involved veterans across all cohorts, have extremely high rates of co-occurring mental illness and substance use disorders often associated with training and service experience (Bernardy, Hamblen, Friedman, & Kivlahan, 2011; Crane et al., 2014 ; Hartley & Baldwin , 2016; Morgan et al., 2018; Schwartz & Levitas, 2011). Being at a higher risk for dual diagnoses, such as PTSD and

opioid or alcohol addiction, also places veterans at a higher risk than the general

population for illegal behaviors which often lead to repeated arrests and incarcerations

(Andrews & Bonita, 2010; Arno, 2014; Baldwin, 2015; Blodgett et al., 2015; Knudsen, &

Wingenfeld, 2016). This claim is substantiated by the 43% of U.S. veteran offenders

currently involved in the courts, probation, parole, jails or prisons, who have had four or

more prior arrests (Bronson et al., 2015; Blue-Howells et al., 2013; Tsai & Goggin,

2017).

As Seomone (2019) explains, "veterans, like civilians, commit crimes for several

reasons, many of which may have nothing to do with combat, training, or trauma, even

though these are salient features within their personal histories" (p. vii). What all justice-

involved veterans do seem to have in common are unique needs which stem from their

military service. These needs generally fall into three overlapping categories: the need to

complete the process of readjustment after returning home, the need to address stress

injuries such as PTSD, and/or the need to address substance use and abuse disorders

(Goggin et al., 2018; Edelman, 2018; Seamone, 2019).

Recent studies indicate veterans may also find adjusting to incarceration more

challenging than their nonveteran counterparts (Albertson, Banks, & Murray, 2017;

Morgan et al., 2018; Tsai, Rosenheck, Kasprow, & McGuire, 2013). Consequently,

modifying treatments based upon the assumption that veterans are a distinctive and at-

risk group is now widely accepted (Albertson et al., 2017; Morgan et al., 2018; Russell,

2009). As a result of these findings, there is a call to implement correctional programs

aimed at addressing the unique needs of veterans (Blue-Howells et al., 2013; Edelman,

2018; Goggin et al., 2018; Seamone, 2019). Additionally, there has been an increase in the VA's efforts to address the needs of justice-involved veterans through their Veterans Justice Programs (VJP) (Blue-Howells et al., 2013). Consequently, there has been a policy shift in the way we are dealing with justice-involved veterans in the United States.

     One result of this shift in policy led to the development of specialized justice and correctional programs tailored to the unique and multifaceted needs of veterans struggling to reintegrate (Blonigen et al., 2017). With the establishment of typical services provided to general population offenders often not adequately meeting the complex and unique needs of justice-involved veterans, the burden of veteran care has shifted from the military onto civilian courts, jails, and prisons. Intercepting veterans along the civilian criminal justice continuum offers us a tremendous opportunity to address the unique mental health needs of incarcerated veterans (Munetz & Griffin, 2006; Russell, 2009; Timko et al., 2014; Tsai & Goggin, 2017).

     Veterans treatment courts (VTCs) have quickly become the prominent specialized approach to divert justice-involved veterans from confinement (Blonigen et al., 2016; Knudsen, & Wingenfeld, 2016; Timko et al., 2016). Another programming trend, with a separate but similar design, are veteran service units (VSUs). The VSU program model was developed for veterans serving time in correctional facilities. Seamone (2019) explains "the philosophies in both veterans' courts and veterans' dorms are virtually indistinguishable" (p. 260). Both models seek to improve veteran offender outcomes through innovative practices and policies (Viglione et al., 2015), and both models connect interventions to military strengths and principles (Edelman, 2018; Timko et al.,

2014; Tsai & Goggin, 2017). Given the close philosophical relationship the models share, studies encompassing VTC implementation, and studies incorporating both VTC and VSU models, were also included in this synthesis to supplement the current absence of literature exclusive to the topic of VSUs.

## Specialized Programs for Justice-Involved Veterans

**Veterans Treatment Courts**

VTCs are specialized courts modeled after the success of other problem-solving courts such as drug and mental health courts (Cavanaugh, 2010; Knudsen & Wingenfeld, 2016; Russell, 2009). The premise of this specialized justice model is that by addressing the underlying causes of the criminal behavior we will ultimately stop the cycle of reoffending, and in turn, benefit society (Seamone, 2019). The intent of VTCs is to connect veteran offenders with services and treatments instead of incarceration (Baldwin 2015; Crane et al., 2014; Huskey, 2017). The array of services and treatments vary depending on the combination of organizations supporting the VTC and the local demographics (e.g., government, social service agencies, mental health treatment providers, court administrators, and veterans service organizations (Seamone, 2019, Yerramsetti et al., 2017). Regardless of supporting organizations, all VTCs require a higher degree of commitment and accountability from participants than is expected in traditional criminal courts. All VTCs provide a combination of veteran peer support, integration of services, and the philosophy of treatment rather than punishment (Huskey, 2017; Tsai & Goggin, 2017).

The first VTC was established in Anchorage, Alaska, in 2004 (see Smith, 2012).
However, Judge Robert T. Russell of Buffalo, New York, is credited with creating the
first VTC for replication in 2008 (Russell, 2009; Seamone, 2019; Yerramsetti et al.,
2017). During the mid-2000's, while presiding over both specialized drug treatment and
mental health court dockets, Judge Russell noticed a significant increase in the number of
veterans appearing before him. The judge also recognized that veterans coming before
him frequently experienced mental health and drug issues concurrently. As a result, he
was inspired to implement a type of hybrid court specifically designed to meet the unique
needs of veterans (Cavanaugh, 2010; Lucas and Hanrahan, 2016; Russell, 2009). Shortly
after implementing the VTC, the judge noticed an impressive reduction in recidivism
(Russell, 2009). The early success of the VTC model prompted Judge Russell to publish a
study which focused on the VTC implementation process and early outcomes. This report
then contributed to the replication of the VTC model in other jurisdictions (Cavanaugh,
2010; Hawk, 2009; Russell, 2009).

By 2015, there was a rapid proliferation of VTCs in the U.S., prompting a law
scholar working with the specialized court model to conduct a nationwide survey of
VTCs. The 700-page report provided a comprehensive source of data on the
characteristics of each VTC operating in the U.S. at that time, along with the first formal
count of VTCs, which totaled 114 (Baldwin, 2015). As the VTC model continued to
spread across the country, the body of literature on the topic of VTCs also increased. The
second wave of VTC research primarily focused on providing insights into the scope of
the problems faced by justice-involved veterans as a way of providing deeper

understanding into what post 9/11 veterans were experiencing as they returned home (Baldwin, 2015; Lucas & Hanrahan, 2016; Timko et al., 2014). More recent VTC literature is focused on the interrelationships between: military service and culture, potential military-related causes associated with criminal behaviors, the high prevalence of recidivism among justice-involved veterans processed in traditional courts, and the therapeutic benefits associated with having a military background (Blodgett et al., 2015; Blue-Howells, et al., 2013; McGuire, 2013; Tsai et al., 2013; White et al., 2011).

The VTC model championed by Judge Russell a decade ago is now the fastest growing of all the specialty court models. The most recent count of VTCs totals 461 VTCs in the U.S., and there are more in development (Flatley, Clark, Rosenthal, & Blue-Howells, 2017; Hartley & Baldwin, 2019; Seamone, 2019). Also, the VTC model has been included in the latest veterans' health administration (VHA) directive; a national mandate to establish procedures for veteran's justice programs (VJP) (USDVA, 2018). Despite a current gap in outcomes research aimed at strengthening correlations between VTC participation and decreases in recidivism, VTCs continue to expand across jurisdictions.

Current VTC literature does offer impressive outcomes evaluation reports provided by individual VTCs operating in the United States. However, individual outcomes can be difficult to generalize to all VTCs without further empirical research. With the release of new quantitative studies focused on exploring the direct link between VTCs and rates of recidivism the gap in empirical research is closing (Hartley& Baldwin, 2019; McCall, Tsai, & Gordon, 2018; Tsai, Finlay, Flatley, Kasprow, & Clark, 2018).

Thus far, all reports have concluded VTCs appear to be working (Cavanaugh, 2011; Edelman, 2018; Hartley & Baldwin, 2017; Seamone; 2019).

Recently, a systematic two-part review of VTCs in the U.S. compiled results from several different VTC studies (see McCall et al., 2018). The researchers began by establishing a base of knowledge on VTCs. This base was then used to facilitate the second part of the study, which involved a scoping study method used to analyze previous VTC research data. Their findings on the effectiveness of VTC models to reduce recidivism were inconsistent. All studies in the metaanalysis showed improvement in rates of recidivism. However, the percentages ranged widely from 2.5% to 56%. The researchers concluded that recidivism was broadly defined and may not have been reported consistently (McCall et al., 2018). The implications from this recent study are there is still a need for more formative VTC evaluations to be conducted, and a need to establish consistent VTC data reporting requirements.

**Veteran Service Units**

Like VTCs, veteran service units (VSUs) are a specialized program designed specifically to address the unique needs of justice-involved veterans who have been remanded to jail or prison. A VSU requires a separate physical space allocated for incarcerated veterans to reside together to interact daily while receiving programming responsive to their unique needs (Edelman, 2018; Rosenthal & McGuire, 2013). Frequently referred to as VSUs (see Tsai & Goggin, 2017), they are also referred to as veterans' dorms, pods, wings, etc. The overall purpose of a VSU is to effectively transform behaviors while acknowledging the inmate's military service through the

infusion of comradery and accountability (Edelman, 2018; Goggin et al., 2018; Tsai & Goggin, 2017).

A published account of a separate unit developed for incarcerated veterans appeared after the end of WWI, over ninety years ago (Seamone, 2019). However, the New York State Department of Correctional Service's Veteran's Residential Therapeutic Program (VRTP) is credited with being the first and longest running VSU, opening in 1987, and still in operation today (Seamone, 2019). Eventually, in 2000, a second VSU opened in the Los Angeles County Jail (Rosenthal & McGuire, 2013). Just a handful of VSUs were operating in the U.S. from 2000 until 2010. During this time, the VSU model would occasionally appear as the subject of a local media report, or in an article put out by a local law enforcement association. Then, between 2010 and 2012, at least five additional VSUs opened in various U.S. states, from Maine to Florida. Presently, there are over 120 VSU programs operating in the U.S. with more in progress (National Institute of Corrections, 2019).

The sudden emergence of VSUs in a relatively short period appears to have occurred mainly through the dissemination of informal communications between various leaders within the national corrections community, and also through the sharing of best practices during various law enforcement conferences (M. Lamb, personal communication, December 17, 2017). Consequently, the implementation of VSUs has been random. Some VSUs are in jail settings, others within prisons. Some were established as a direct outgrowth of a successful VTC in the same jurisdiction (e.g., Erie County), while others were implemented prior to the addition of a VTC (e.g., Saint

Louis); still many VSUs operate in jurisdictions that have no VTC with which to

collaborate (Seamone, 2019). Nonetheless, literature on the topic of VSUs has begun to

appear indicating that some programming trends have already emerged including

voluntary enrollment with mandatory participation, a foundation of peer support, and

specialized therapeutic interventions (Schwartz & Lavitas, 2011; Seamone, 2019; Tsai &

Goggin, 2017).

One of the first examinations of a VSU model with a focus on implementation

featured the Community of Veterans Engaged in Restoration (COVER) program for men,

in San Francisco, CA (see Schwartz & Levitas, 2011). Like the inception of Judge

Russell's VTC model in upstate NY, the COVER VSU program was developed by

former sheriff, Michael Hennessey, as a hybrid version of a successful program already

in operation. The COVER program was originally led by undersheriff, Chris Cunnie, who

is also a military veteran. The seminal study on the COVER VSU revealed several key

concepts integral to the advancement of the VSU model, including theories of justice, a

champion to lead implementation, and a combination of program components that

emphasize: a return to military pride, peer support, intensive treatment, and consolidated

access to needed services (Schwartz and Levitas, 2011).

Descriptive data on VSUs next appeared in a review which included other various

justice programs being disseminated across the country by the U.S. Department of

Veterans Affairs (see Blue-Howell et al, 2013). Although the VA's reentry outreach

program officially began in the 1970's post-Vietnam era (Schaffer & Dick, 2009), the

increase in post 9/11 veterans returning home, along with the need to cut correctional

costs while intensifying treatment interventions for offender populations, prompted the

U.S. government to escalate their response. The federal response consisted primarily of

the formation of the Re-Entry Policy Council, in 2005, and the enactment of the Second

Chance Act of 2007 (Blue-Howells et al., 2013). The VA chose to meet the national

mandates by broadening their commitment to serving justice-involved veterans through

the establishment of veterans' justice programs (VJP). To do so, the VA adopted the

intervention framework of the Sequential Intercept Model (SIM) (Munetz & Griffin,

2006). Modifying the SIM enabled the VA to offer services to veterans at multiple points

along the criminal justice system continuum (Blue-Howells et al., 2013; McGuire, 2007;

Edelman, 2018). The five justice system intercept points are: law enforcement and

emergency services, initial court hearings/detention, jails/courts, reentry, and community

corrections/support (CMHS National GAINS Center, 2008).

     The veteran's justice outreach (VJO) and the health care for reentry veterans

(HCRV) are the two VJPs specifically developed to maximize interception of veterans

along the criminal justice continuum. Both programs employ field specialists throughout

the nation to coordinate programs and provide clinical services following an assessment

of needs. The goal of VJP specialist is to reach out to provide case management for

veterans involved in treatment courts, and also "reach in" to provide in-facility assistance

to veterans, including some housed in VSUs, which is part of intercept point three)

(Blonigen et al., 2017; Blue-Howell et al., 2013; Finlay et al., 2017; Morgan et al., 2018).

The VA's HCRV specialists report that it is particularly helpful when they manage their

veteran clients who are conveniently living together in a VSU, while they are also

participating in programs focused on reentry (Blue-Howells et al., 2013).

Within the report from the VA, a small number of VSU innovators were asked to

relay their experiences from when they developed their model. One VSU adopter shared

that when they were determining if there were enough veterans in their facility to create a

separate unit, they began with a veteran status analysis of their inmate population (Blue-

Howells et al., 2013). It is undoubtedly important to obtain a formal count of inmates

with veteran status to verify the capacity potential for VSU development, and this is often

one of the first steps toward the development of a VSU (Blue-Howells et al., 2013;

Edelman, 2018; Tsai and Goggin, 2017).

Supporting the earlier findings of Schwartz and Levitas (2011), the VA report

also discussed common components of VSU implementation such as, staffing the VSU,

coordinating community resources, and promoting peer mentoring (Blue-Howells et al.,

2013). Despite variations in implementation, the overall impact of justice programs

working with VTCs and VSUs is significant. However, the VA report concedes that

although specialized programs have received tremendous support, including numerous

calls for replication of the model, comprehensive, evidence-based evaluations of

implementation strategies, and prescriptive practices are lacking (Blue-Howells et al.,

2013). For instance, the provision of evidence-based formulas to determine how many

veterans are "enough" to justify a unit, or strategies for ascertaining the minimum or

maximum number of veteran's based upon such variables as funding, access to

coordinated resources, or group dynamics, would provide much needed guidance toward the replication of quality VSU programs (Blue-Howells et al., 2013).

The next significant contribution to providing a deeper understanding of the VSU phenomenon was provided in 2017, by a respected scholar of veteran's mental health issues; Dr. Jack Tsai. Partnering with social workers from the VA Connecticut Healthcare System, they employed data from a quality improvement survey completed by 87 veterans living on a VSU, located in an Enfield, CT. jail (see Tsai & Goggin, 2017). The survey data was designed to capture the characteristics, needs, and experiences of veteran housed in a single VSU. A summary of the findings from the quantitative data revealed that all 87 of the veteran inmates surveyed had a history of past incarcerations. Also, the majority reported that they felt the VSU prepared them for reintegration and that the VSU was better than other units they had experienced (Tsai & Goggin, 2017).

In addition to questions regarding the inmate's demographic characteristics and ratings of satisfaction, the quality improvement survey also contained four qualitative questions designed to gain insight into the experiences of the VSU inmates. The collected qualitative data from the open-ended questions was redeployed to carry out a second study which became the first qualitative study published on a VSU (see Goggin et al., 2018). Using a grounded approach, emerging themes were identified based on feedback provided by the veteran inmates regarding perceptions of their programming and reentry needs. The study provided additional insights into what inmate's experience on a VSU. Additional themes resulting from this study provided a clearer picture of programming

components with the potential to improve the quality of the VSU model (Goggin et al., 2018).

Adding to the VSU previously identified components of strategic staffing, coordinating community resources, and the promotion of peer support, the first quality study of a VSU provided additional implementation components believed to be common to most VSUs. These components included: a military culture experience that implements patriotic décor, military ceremonies to commemorate national holidays, a dormitory layout to simulate boot camp, common wake-up times, a unit meeting each morning, and work assignments (Goggin et al., 2018). Furthermore, the study provided supplemental information regarding VSU components with the potential to advance our understanding of implementation quality such as, outdoor physical activities, career training and educational courses, and intensifying the level of treatment for mental health and substance use issues (Goggin et al., 2018).

One aspect which may be unique to the Connecticut VSU study, is the instrumental role partnering with the VACT played in the creation of this VSU (Goggin et al., 2018). The HCRV field representatives in Connecticut assisted with programming, worked closely in conjunction with the Connecticut DOC during implementation, and remained an ongoing presence in program delivery and adjustments toward quality improvements (Goggin et al., 2018). The findings from this study also served to further support Blue-Howell et al., (2013) assertion that veterans' justice programs have prompted innovative partnerships with organizations to develop local solutions.

This seminal study carried out by Goggins et al. (2018) served to expand our knowledge of components associated with VSU model development. Despite being a single case study, insights gained suggest there is great potential for VSUs to address the unique needs of veteran inmates. However, these findings alone could not be generalized to inform the replication of further VSUs. As such, the authors called for a more rigorous evaluation of VSUs to inform further development of the model, especially because it appears to be working (Tsai & Goggin, 2017).

The National Institute of Corrections (NIC) published a white paper titled Barracks behind bars in veteran-specific housing units: Veterans help veterans help themselves (Edelman, 2018), to highlight veteran-specific housing. This was the second paper produced as part of the NIC's justice-involved veteran compendium project. The first NIC paper featured the VTC model. The white papers were written to serve as how-to guides for jurisdictions looking to implement or improve upon a specialized program for justice-involved veterans (Edelman, 2018). Vignettes from personnel involved in the implementation of five different VSUs from around the U.S. were featured in the publication. The overall stated goal of the report was to "illuminate the increasing number of VSU programs in jails across the country that are working to prevent recidivism, and improve the safety of the public as well as sheriffs, correctional officers, and inmates by reigniting a sense of military culture and values" (Edelman 2018, p. xii).

The report by the NIC provided the first collection of accounts on the topic of VSU implementation from a sampling of individuals directly involved in the development, implementation, and administration of jail based VSUs from around the

United States. At the onset of this comprehensive report, a 23-question list was offered

for the reader to discern if the development of a VSU was feasible. Questions were

offered such as, 'what is the first thing I/we ought to do', and 'do we have the data to

support such programming' (see Edelman, 2018). The report also presented narratives

from a variety of VSU administrators with firsthand knowledge of VSU programming

from jails located in California, Ohio, Washington, Florida, and, Massachusetts. No

VSUs located within the prison setting were included. The collection of rich narratives

presented in the whitepaper conveyed the experiences of individuals that were

instrumental in making their VSU model a reality. Common themes identified from those

narratives were used to organize the report into three phases: Design/Develop,

Implementation, and Sustainability. Each section in the report concluded with a list of

items for those interested in creating a VSU to consider such as, 'identify a champion'

and 'determine what space within the facility can be converted to a veteran's pod'

(Edelman, 2018).

    As the most comprehensive publication devoted specifically to VSU

implementation thus far, the NIC report served to reinforce previously identified themes

associated with this emerging trend, including reports of noticeable reductions in

recidivism. Additional themes reiterated in the report included: the need for pragmatic

and innovative corrections professionals to champion VSU implementation, the

strengthening effect of VTCs and VSUs working symbiotically, the necessity to partner

with supportive community organizations, and the infusion of military values (Edelman,

2018). Notwithstanding, this report provided valuable insight into the VSU phenomenon

and practical considerations to those interested in implementing a VSU. However, the report was not conducted using research grounded in a philosophical assumption, nor did it include an interpretive framework through which to deduce evidenced-base findings associated with sound applications (see Creswell, 2013). Fortunately for VSU scholars, the year following the release of the report released by the NIC one of the featured contributors to the NIC report published book on the variety of approaches available to address the needs of justice-involved veterans.

Major Seamone's (2019) book supports the idea that correctional facilities have a tremendous opportunity to provide specialized and effective interventions aimed at ending the cycle of recidivism, and the reintegration of justice-involved veterans to return to society as productive members. This is the first book devoted solely to understanding the approaches being used in the U.S. to address the needs of justice-involved veterans. The book begins with a thorough history of past programs up to present day. Also, the author draws on countless examples from critically cited source material to establish the most comprehensive resource guide for those in the criminal justice field who are interested in finding better ways to serve veterans.

Additionally, the theme of flexibility during and after the initial implementation of a program for justice-involved veterans is infused throughout the book (Seamone, 2019). Flexibility as a theme is particularly germane to the quality implementation framework (see Meyers et al., 2012) which asserts the success of programs must include a recognition to remain structured yet flexible, and also to recognize that implementation is a dynamic process that is equally dependent upon following crucial steps in a specific

order, while keeping the expectation that certain phases may need to be revisited (Fixsen

& Fixsen, 2016; Meyers, et al., 2012; Signé , 2017).

**Arguments Against Specialized Treatment**

Despite a growing body of evidence showing specialized programming for

justice-involved veterans is having a positive and measurable impact on veteran offenders

and their reentry (see Edelman, 2018; Goggin et al., 2018; Rodriguez et al., 2017),

programs tailored to the needs of justice-involved veterans have been criticized by some.

Opposition to specialized care for veteran offenders, be it VTCs or VSUs, tends to focus

on entitlements. Programs for justice-involved veterans receive regular objections to the

appearance of leniency and to giving additional benefits and privileges based solely on

one's military status (Cavanaugh, 2010; Hawk, 2009; Lucas & Hanrahan, 2016; Miller &

Miller, 2016). Detractors of specialized programming for justice-involved veterans have

also voiced concern over allocating costly programming resources to veterans when

courts and correctional facilities already have the means in place to connect therapeutic

services to those in need, e.g., PTSD treatments (Hawk, 2009; Miller & Miller, 2016)

Proponents of specialized programming for justice-involved veterans counter with

the view that the criminal conduct of veterans was caused by underlying injuries, be they

mental or physical, which they received while serving in the military (Cavanaugh, 2011;

Lucas & Hanrahan, 2016). Another complaint overheard is that additional benefits are

being bestowed on veterans participating in specialized programs which are not afforded

to the general population. To which, supporters respond that establishment of specialized

programming for veterans does not put an undue financial strain on the public. The cost

of justice-involved veterans is already allocated in the criminal courts and correctional systems. Moreover, many military veterans have earned those benefits under the law. It is the consolidated nature of specialized programs offered in a setting which brings veterans together. This arrangement also facilitates the best use of veteran benefits by increasing information and access. Recidivism is a more costly option (Edelman, 2018).

A more substantive concern being expressed by several in the field is the rapid diffusion of criminal justice programs with limited focus on evidence-based models or practices (Boppre et al., 2018; Taxman, 2014; Viglione et al., 2015). Many have stated that it is incumbent upon veteran justice program innovators to use care as they conceptualize the implementation of chosen program components to also focus on program quality (McGuire, 2007; Rhine et al., 2006; Taxman, 2014; Welsh, 2006). There is widespread agreement among correctional researchers that evidenced-based data is critical to implementing quality initiatives and must be considered in the implementation phase to maximize quality programming (McGuire, 2007; Rhine et al., 2006; Taxman, 2014; Welsh, 2006).

## Implementation

Signé (2017) describes the study of implementation as an attempt to address why and how policies deviate from their desired and expected outcomes by providing frameworks for consideration that apply in a variety of contexts (p. 9). In correctional programming, quality is defined as the degree to which a planned intervention is delivered as intended and with a high degree of impact (Baglivio et al., 2018; Meyers et al., 2012; Salisbury et al., 2019; Taxman, 2014). In simpler terms, quality programs are

programs that are successful and sustainable. In the implementation science community, the concept of quality is synonymous with fidelity and integrity. Regardless of the term used, assuring quality implementation of corrections interventions is tied to outcome improvements for inmates (Boppre et al., 2018; Lowenkamp et al., 2006; Welsh, 2006).

**Evidence-Based Practice in Corrections**

As a result of formerly popular 'tough on crime' policies proving to be ineffective in the U.S., programs focused on positive rehabilitative outcomes have made a return as the standard in the United States. (Boppre et al., 2018; Gideon, 2013; Salisbury et al., 2019; Viglione et al., 2015). Accordingly, correctional scholars have sought to gain greater insight into the significant relationships between the application of evidence-based practices and the achievement of desired program outcomes (e.g., rehabilitation, reduction in rates of recidivism, reentry, and reintegration) (Durlak & Dupre, 2008; MacKenzie, 2005; Nilsen et al., 2013; Rhine et al., 2006; Salisbury et al., 2019). Additionally, Taxman & Belenko (2011) maintain that several evidence-based practices have now been proven to be effective for incarcerated offenders being treated for co-occurring mental health and substance issues.

However, knowing the implementation components related to evidence-based programming may not provide the whole picture. Factors such as finding an individual to champion implementation and buy-in from corrections personnel may also contribute to the success or failure of a program. As the pendulum swings back from a punitive mission towards a philosophy of rehabilitation, correctional employees are expected to understand and apply evidence-based programming as they work with their internal

stakeholders, such as inmates and superiors, and their external stakeholders, such as VJP

fieldworkers and the community. Also, employee attitudes about transitioning to

evidence-based practices have been shown to vary from receptive to resistant to change

(Boppre et al., 2018). Therefore, implementers of the VSU model would be remiss if they

did not take into consideration the attitudes, motivations, and additional training needs of

their correctional employees during the planning stages and beyond (Boppre et al., 2018).

Another consideration of VSU implementation involves the constraints and

limited opportunities to study veterans on a VSU with control groups, as prisoners are a

protected population (Montgomery, 2018). Nevertheless, veterans do have much to say

about their needs and can provide great insight into how best to address them. For

example, the inclusion of experiences from inmates living on a VSU can provide a rich

context of their perspectives on the quality of the programming they receive (Tsai and

Goggin, 2017; Goggin et al., 2018). It is because individuals interact in complex ways

that researchers should attempt to include studies on offenders and their interactions with

program interventions whenever possible (Welsh, 2006).

**Quality Implementation and Recidivism**

In the field of correctional programming, Lownekamp et al., (2006) are credited

with the development of a valid and reliable instrument to assess the risk of recidivism.

Their study helped establish a significant relationship between program integrity (quality)

and program effectiveness (decreased recidivism) (Andrews & Bonita 2010; Lownekamp

et al., 2006; Mackenzie, 2005; Rhine et al., 2006; Welsh, 2006). To corroborate this

connection, Lowenkamp et al. (2006) collected data from 38 offender programs to rate

program integrity using a common metric; the Correctional Program Assessment Inventory (CPAI) measurement (Gendreau and Andrews, 1994). When they compared groups of offenders deemed to be receiving high-quality programming against those receiving low-quality programming, they found a significant difference in rates of recidivism between treatment groups. Furthermore, their research identified cognitive and behavioral programs as the most effective interventions for most offenders and concluded that program implementation, offender assessment, and evaluation are important in determining the effectiveness of correctional programs (Lownekamp et al., 2006).

Recently, the groundbreaking work of Lownekamp et al. (2006) was expanded by a team of justice scholars who set out to answer the question *does treatment quality matter?* Employing data from a statewide, long-term residential program for justice-involved juveniles, Baglivio et al. (2018) devised a multi-level model to specifically assess the effects of treatment quality on recidivism. Consistent with previous studies, the researchers used a measure of program quality, the SPEP, aligned with the utility of CPAI as the standard by which to measure treatment quality. Examining individual recidivism rates, Baglivio et al. (2018) found "the odds of recidivism to be 11% lower for every one-point increase in treatment quality" (p. 170). This study reinforced the call for justice programs to ensure that steps be taken to improve quality. Their study was conducted on a juvenile offender population; however, scholars agree, the study's rigor and scope (N=2400) increased the transferability potential of the findings to other offender populations (Baglivio et al., 2018; Salisbury et al., 2019).

Despite the recognition that quality implementation is a key variable related to reductions in recidivism (Bourgon & Armstrong, 2005; Landenberger & Lipsey, 2006; Lowenkamp et al., 2006; Salisbury et al., 2019), the extent to which empirically supported risks for recidivism, and evidence-based treatments are considered when developing programs for justice-involved veterans remains largely unknown (Blonigen et al., 2014; Timko et al., 2014). Therefore, steps to improve the quality of treatment are critical toward reductions in recidivism (Baglivio et al., 2018; Salisbury et al., 2019; Viglione et al., 2015). For example, in an excerpt from the NIC report (Edelman, 2018) in response to a question about the implementation of their VSU, a corrections professional stated "I started, and two weeks later we had this unit up and running…we didn't have a blueprint…we've been playing it by ear as far as what we've been doing" (p. 68). This statement highlights the potential of evidenced-based practices, specifically designed to reduce recidivism, towards improving programming, and to further guide implementers of the VSU model.

Programs developed to reduce offender recidivism, and effective correctional programing are now focused on providing evidence-based guidelines to achieve the highest quality. The extent to which practitioners employ this knowledge has been shown to have a direct effect on the quality of correctional programming, which in turn, produces more favorable outcomes for those it is intended (Baglivio et al., 2018; Blonigen, et al., 2017; Mackenzie, 2005; Miller & Miller, 2015;, Rhine et al., 2006). Despite continual calls from researchers for evidence-based corrections programming focused on human services, many correctional administrations do not seek to implement

programs with consideration for the standard of veteran care to guide them when making

decisions about programming (; Blue-Howell, et al., 2013; Mackenzie, 2005; Taxman,

Pattavina, & Caudy, 2014), especially during the program design phase (Welsh, 2006).

According to Van Dieten and Robinson (2005), efforts are being made in the field of

corrections to promote and engage in evidence-based practices. Furthermore, with an

ever-expanding research foundation in place, it is up to researchers to convey this

detailed information to correctional professionals so they may feel confident to apply the

evidence-based practices in practical ways, while also ensuring the delivery of high-

quality programming to achieve sustained and positive results (Rhine et al., 2006).

## Summary

This chapter reviewed the scholarly literature which identified the need for

continued research into processes associated with VSU implementation within U.S.

correctional facilities. The QIF was the theoretical framework chosen to guide this

investigation. Presently, the VSU model is in its infancy; as such, there is a shortage of

extant literature available on the development of the VSU model. Despite stated concerns

for there being little evidence-based data supporting the success of VSUs in the U.S.

(Blue-Howells et al., Tsai & Goggin, 2017), VSUs continue to open. Although not quite

as prolific as VTCs, VSUs appear to be following the growth trajectory of their veteran-

specific program counterpart (Blue-Howells et al., 2013; Edelman, 2018). Accordingly,

early research on the topic of VSUs has relied heavily on previous empirical studies from

the VTC literature to support the empirical foundation to build upon and gain a greater

understanding of the closely related VSU phenomenon.

Employing the theoretical foundations provided by the QIF was essential to providing insights into the implementation practices associated with quality programming. The QIF was created explicitly to provide a foundation of understanding for the complex and dynamic natures of policy and programming implementation. This framework also emphasizes the application of evidence-based practices to improve outcomes. In the domain of correctional science, desired outcomes equate to improvements in rehabilitation, reentry, reintegration, and a reduction in recidivism, all vital to the success of correctional programs. The utility built into the implementation steps of the QIF serve as a practical blueprint for implementation. Lastly, the use of the phenomenological method allowed those who have implemented a VSU to discuss their implementation experiences from their own perspectives. Chapter 3 discusses the methods used to understand the VSU adopters' experiences during the implementation process.

Chapter 3: Methodology

**Introduction**

The preceding chapter presented the current literature introducing the phenomenon of specialized programs for justice-involved veterans, with an emphasis on the implementation of VSUs and the need for continued research to understand the phenomenon of VSU implementation in the United States. Chapter 3 presents the research methodology used to examine this phenomenon, including the data collection and analysis procedures, the participant selection process, the role of the primary investigator, and the measures taken to protect the participants in this study.

**Research Methodology**

A specific type of phenomenological method referred to as the transcendental approach (see Moustakas, 1994) was chosen as the qualitative methodology best suited to obtain a deeper understanding of the phenomenon of VSU implementation. Sometimes referred to as the empirical approach, the transcendental approach is used to deemphasize the individual in the process of descriptive analysis and to identify the essence of the experience (Creswell, 2013; Patton, 2015). In the current study, the essence of implementing a VSU was the experience addressed. Originally founded by Husserl in 1962 (see Patton, 2015), phenomenology has evolved into a variety of approaches. Most approaches can be categorized as descriptive or interpretive (Burkholder, Cox, & Crawford, 2016; Creswell, 2013; Smith, 2013). Transcendental phenomenology is a descriptive approach. The purpose of all types of phenomenological investigation is to uncover common meaning from the perspectives of several individuals who have

personally experienced a phenomenon (van Manen, 1990). In the current study, the phenomenon to be understood was the experience of implementing a VSU within a correctional facility.

The transcendental approach includes in-depth interviews with individuals identified as having experienced a phenomenon. Participants share the what and how of their experiences, which provides the essence of the phenomenon. In-depth interviews are a common data-gathering technique used in many fields related to correctional science, including criminal justice and public administration (Rubin & Rubin, 2011). The phenomenological method is often used as a framework for program evaluation when the purpose is to capture the essence of the experiences of those involved in a program (Patton, 2015). Phenomenology was selected as the qualitative method used in this study to capture the experiences of those involved in implementing a VSU program.

Semistructured, open-ended interview questions were used to obtain greater insight into how the VSU implementation process unfolded. By focusing on reconstructing what happened in the unfolding of VSU implementation, I was able to describe the essence of the VSU experience (see Rubin & Rubin, 2011). Also, this approach allowed for multiple interpretations of the implementer's experiences, from which the essence of VSU implementation as a single concept could then be captured (see Creswell, 2013). In the transcendental approach, it is important that the essence is described, not explained or analyzed (Moustakas, 1994). In the current study, the conditions and situations experienced by the VSU implementers provided the basis of the structural descriptions. The textual and structural descriptions, when combined, convey

the essence of the experience (Burkholder et al., 2016; Creswell, 2013; Moustakas, 1994).

The transcendental approach is predicated on following a series of steps. The steps include collecting data from several individuals who have experienced the phenomenon, analyzing the data by reducing the information to significant statements, and combining those statements into themes (Creswell, 2013). There are common features among the types of phenomenology, beginning with an emphasis on a single phenomenon. Also, the appropriate number of participants is lower with studies using the phenomenological approach than with other qualitative methods (Burkholder et al., 2016). Phenomenologists traditionally limit the number of individuals to be interviewed to no less than three and no more than 25 to capture the essence of a common experience (Creswell, 2013; Giorgi, 1997; Mason, 2010; Patton, 2015). Interviewing many participants is not practical given the amount of data produced from each in-depth interview, and more participants do not necessarily produce more insight into a phenomenon (Patton, 2015).

Furthermore, all studies using the phenomenological approach must include a philosophical discussion of what Creswell (2013) called "the refusal of the subjective-objective perspective" (p. 78). Because the phenomenon is not merely reducible to facts, the refusal is necessary because participants have both subjective experiences and the objective experience that emerges from the participants who have experienced the same phenomenon. Finally, the phenomenologist must include a discussion of participants' personal experiences with the phenomenon of study. This acknowledgment serves to

bracket the researcher (Burkholder et al., 2016; Creswell, 2013; Moustakas, 1994). The

purpose of bracketing is to allow the focus to remain on the participants' experiences in a

very intentional way (Creswell, 2013; L. Finlay, 2009; Patton, 2015).

Despite the step-by-step instructions offered to guide the novice researcher, there

are errors to avoid in phenomenological research. For phenomenologists to remain in

alignment throughout the study, they must be cognizant of keeping the study grounded in

a philosophy of phenomenology. Grounding can best be achieved by staying within the

guidelines of their chosen phenomenologist to avoid presenting conflicting viewpoints

(Patton, 2015). I followed the philosophical guidance of Moustakas (1994). Also, I

ensured that only phenomenological procedures were used to verify phenomenological

procedures (see Giorgi, 2006). Patton (2015) noted that having a random reviewer or

having the participants verify the findings to achieve triangulation are not appropriate

strategies because the average person is not likely to know phenomenological procedures.

To improve the reliability of the current study, I employed specific standards developed

by Creswell (2013) to validate the findings. A detailed description of the standards is

found in the validity and reliability section of this chapter.

Phenomenological methods have been widely used by public policy and criminal

justice researchers in qualitative studies as a means of better understanding the lived

experiences of those who have implemented specialized programs for justice-involved

veterans. Shannon et al. (2017) used a phenomenological approach to examine how key

stakeholders involved in the implementation of VTCs in Kentucky experienced the

process. From the data collected through in-depth interviews and supplemental

observations, Shannon et al. identified themes to better understand the VTC implementation experience. Similarly, Lucas and Hanrahan (2016) used phenomenological methods to explore how VTCs function post-implementation. By employing phenomenological methods to explore the functions within VTCs, Lucas and Hanrahan were able to gather data that provided rich, in-depth descriptions of the experiences of those involved in the day-to-day processes of VTCs, along with participants' perceptions of successful VTC implementation.

In the current study, the phenomenological approach provided deeper insight into the what and how of the shared experiences of VSU implementers. Through the gathering of in-depth data from implementers of the VSU model, a better understanding of their implementation practices emerged. To increase the potential for real-world application, I employed the evidence-based processes and procedures integrated into the QIF (see Meyers et al., 2012) to organize and clarify the data. The transcendental phenomenological method was the vehicle of inquiry chosen for this study to frame and inform procedures in a way that improves understanding of VSU implementation.

**Research Questions**

To keep the study grounded in a philosophy of phenomenology (see Moustakas, 1994), the data collection and analysis were focused on two research questions:

RQ1: What have correctional administrators experienced in terms of implementing a veteran service unit?

RQ2: What context or situations influenced or affected correctional administrators' experiences as they implemented their veteran service unit?

These questions allowed for the gathering of rich textual and structural descriptions of the implementers' common experience (see Creswell, 2013). To ensure each participant was given the opportunity to provide a comprehensive recollection of their VSU implementation experience, a series of semistructured, open-ended questions were included in the interview data collection instrument (see Appendix A).

**Participant Access**

Before gaining access to study participants, I obtained permission from the Walden University Institutional Review Board (IRB). Walden University's approval number for this study is # 08-14-19-0241924 and it expires on August 13, 2020. The study was limited to participants who identified as having firsthand experience with implementing a VSU in the United States. Those in a position to implement the VSU model are typically sheriffs or other state and federal correctional administrators. In the first qualitative study on VSUs, Tsai and Goggin (2017) found that there was no confirmed number of VSUs in the United States. Based on news reports, Tsai and Goggin estimated that in addition to the featured VSU in Connecticut, there were VSUs in at least 13 other states. Due to the lack of knowledge regarding the number and location of VSUs operating in the United States, gaining access to those who had implemented the VSU model within their correctional facility was the first obstacle to overcome.

On the suggestion of an administrator who had implemented a VSU within his correctional facility, I contacted the National Sheriffs Association (NSA). After contacting the NSA's director of outreach and law enforcement relations, I was granted access to a distribution list containing the names and contact information for every

correctional facility within the NSA's membership. Each county and regional sheriff's department listed on the 50-state spreadsheet was contacted to determine whether their correctional facilities had implemented a separate housing unit for veterans. The contact information from those who responded "yes" to the initial inquiry was compiled into one document. Also, during this time, the National Institute of Corrections (NIC, 2019), as part of the Justice-Involved Veterans Network, uploaded a map and formal count of VSUs operating within U.S. prisons and jails to their website. The list provided by the NIC and the prior list created from the NSA spreadsheet inquiries were cross-referenced to create a comprehensive list of U.S. correctional institutions with VSUs.

Next, following IRB approval, an email was sent to purposefully selected correctional administrators identified as having implemented a VSU within their correctional facility (see Appendix C) to participate in an interview and share their VSU implementation experiences. After receiving confirmation replies from potential participants, I sent a follow-up email asking those who had agreed to participate in the study to provide the three best times and dates to complete the interview. After the participants provided their first, second, and third choices, a confirmation email was sent confirming the date and time of their first choice and to ensure that the terms of the informed consent were fully understood.

**Selected Locations**

In the United States, the VSU model has been implemented in both jail and prison settings. However, I did not find any relevant studies that addressed VSUs implemented in a prison setting. The general difference between jails and prisons is the length of stay

for inmates. Prisons are designed for long-term incarceration, whereas jails tend to house

inmates for relatively shorter periods. Jails and prisons both offer an array of educational,

substance abuse, mental health, and vocational programming. Presently, in the U.S., there

are more VSUs implemented in prisons (N=76) than there are in jails (N=46) (National

Institute of Corrections, 2019). As such, a decision was made to select study participants

who had implemented VSUs in both settings. Five study participants had implemented

VSUs within the prison setting, and two had implemented VSUs within the jail setting.

Both settings were included to avail the largest pool of participants and to ensure

substantiation of the data representative of ratios consistent with the current total number

of VSUs in the United States.

**Selected Participants**

In a metaanalysis conducted for the purpose of identifying the appropriate

qualitative sample size when using the phenomenological approach, Mason (2010)

recommended five to 25 participants. As a researcher working alone, it was imperative to

keep collected data to a manageable amount (Patton, 2015). Therefore, a sample size of

seven was chosen as the ideal number of VSU implementers to collect interview data to

gain a better understanding of the participants' common experiences (Creswell, 2013).

Additionally, selecting participants from a variety of U.S. geographical locations was also

desirable to account for potential regional divergences among U.S. correctional

administrators (see Baker, Edwards, & Doidge, 2012). With these criteria in mind, the

seven participants interviewed were chosen from the following settings and locations:

one from a prison in the Northeast region of the U.S., one from a jail, two from prisons

located in the Midwest region of the U.S., one from a jail and one from a prison both

located in the Southwest region of the U.S., and one from a prison located in the Western

United States. The number of participants, and the variety of correctional settings and

geographical regions, helped to assure data saturation.

**Ethical Protections**

To ensure all encounters with participants were handled ethically, Section III of

the IRB application provided by Walden University (n.d.) was completed and approved.

The application contained two areas of 'minimal risk' to consider. A minimal risk level

was estimated for the section titled unintended disclosure of confidential information

such as, educational or medical records (Walden University, n.d.). The rationale for

concern regarding this section related to participants potentially disclosing confidential

information about inmates (a specially protected population) while conveying their VSU

experiences. To keep compliant, participants were instructed not to provide any personal

information regarding a past or present inmate during their interview. Also, the IRB and

the study participants were assured that the researcher would not include any identifying

inmate information in the study.

The second 'minimal risk' identified pertained to the IRB application section

titled "social or economic loss (e.g., collecting data that could be damaging to any

participants' or stakeholders' financial standing, employability or reputation" (Walden

University, n.d.). The rationale for this concern related to participants potentially

disclosing confidential information that could be used by their employer against them and

potentially jeopardize their job. To assure compliance, the consent form contained

guarantees of privacy (See Appendix D: Informed Consent). Also, participants were

assured, that any employment identifiers would be excluded from the study. Finally,

participants were assured their personal identity would be kept anonymous.

**Data Collection Procedures**

The further ensure the instrument chosen for data collection would provide rich

contextual data, the in-depth interview protocol used incorporated several of Patton's

(2015) recommendations including a transition format; "announcing that one section or

topic of the interview has been completed, and a new section or topic is about to begin"

(p. 463). The open-ended questions were constructed using the phases of the QIF

(Meyers et al., 2012) (See Appendix B:). Although typically included in many qualitative

approaches, supplemental sources of data (historical accounts, poems, etc.) were not used

as these types of supplemental sources were not germane to the purpose of the study. At

the beginning of each interview, appreciation was expressed to the participant. Each

participant was sent the exact list of interview questions in advance of the scheduled

interview to make sure the interviewee felt comfortable and prepared to answer the

questions. The participants were asked if they had any questions about the process or the

consent form. The participants were also reminded that the interview was being recorded

for ease of transcription purposes.

The structure of the in-depth interviews combined features from both the

qualitative scheduled-structured format and the qualitative non-scheduled-structured

format (Frankfort-Nachmias & Nachmias, 2008). Also, to keep the collection of

consistent and quality data (interview statements), the scheduled-structured format

required that the same questions be asked in the same manner and using a common

vocabulary with each of the seven participants. This ensured that any variations among

responses were attributed to the actual differences among the respondents and not to

variations in the interview questions or process. If questions were worded differently

each time a participant is interviewed, one runs the risk of eliciting a different response

(Frankfort-Nachmias & Nachmias, 2008).

The data collection instrument also followed basic tenants of the non-scheduled-

structured format in that all of the respondents were known to have been involved in the

particular experience, the interview referred to a situation that had been analyzed prior to

the interview, and the interview was guided by a specific topic related to the research

questions (Frankfort-Nachmias & Nachmias, 2008). The seven interviews took an

average of 39 minutes to complete. Debriefing of the participants included a reminder

that they possessed the researcher's contact information in the event they had any

questions or concerns later. The participants were told they would be receiving a copy of

the interview transcript to ensure the content each interviewee provided was transcribed

as recorded. Lastly, the participants were informed that they would be receiving a

summary of the results once the study was completed.

**Data Management and Analysis**

Using digital voice to transcription software, statements were organized using an

open coding system with a qualitative application called Quirkos. The Quirkos

application was chosen over other qualitative research applications as it allowed for the

organization of data in a way that closely matched scheme preferences. Once all data

were coded and categorized into themes, it was quite simple with Quirkos to run reports based on key words or themes. The application immediately provided colorful and easy to read graphics depicting both the common themes and subthemes that were organized into logical patterns helpful to fleshing out characteristics of the participants shared experiences.

The participants' statements were first organized into two broad categories; Implementation (RQ1) or Situational Influences (RQ2). Some statements were included in both RQ1 and RQ2 as they pertained to both. Next, each interview question was precoded based on the four phases of the QIF. Once organized into the format guided by the QIF, the statements were revisited with a specific focus on any repeated themes (patterns) to assist in uncovering the common experiences of the participants (see Creswell, 2013). The incorporation of coding flexibility used early in the process provided ease of use as the collected data was read over and over. As Patton (2015) states, "the more one interacts with the data, the more patterns and categories jump out" (p. 530). Finally, those significant statements identified as needing further categorization, as well as, outliers and one-offs were assigned a code. When describing the process of open coding, Patton (2015) points out, "qualitative analysis is typically inductive …figuring out possible categories, patterns, and themes" (p. 542). However, since the QIF of Meyers et al., (2012) was applied as an additional means of informing data analysis and procedures for coding, the QIF engagement with the data also allowed for deductive analysis.

**Validity and Reliability**

Validation strategies to improve quality began with the chosen approach. Defining features of phenomenology rely largely on in-depth interviews to reveal the lived experiences with focused attention on gathering data that leads to rich textual and structural descriptions of the experiences. Including detailed descriptions enables the reader to transfer information to other settings and to decide whether the findings can be transferred (Creswell, 2013). However, direct discussions on quality within phenomenology are somewhat lacking (see Creswell, 2013). Therefore, to strengthen the credibility of the findings, the following specific standards, presented as a series of intentional questions, developed by Creswell (2013) were implemented to assess and improve the quality of this phenomenological study:

1.  Does the author convey an understanding of the philosophical tenets of phenomenology?

2.  Does the author articulate the phenomenon in a concise way?

3.  Does the author use procedures of data analysis (e.g., Moustakas' systematic steps, open coding)

4.  Does the author convey the overall essence of the experience of the participants (experience describe in the context in which it occurred)

5.  Is the author reflexive throughout the study?

The five quality improvement steps offered by Creswell (2013) were considered throughout the study. To ensure adherence to standard number one, several philosophical tenants of phenomenology were conveyed within the study, including focusing on

understanding the essence of the VSU implementation experience. Also, the unit of analysis was appropriate as the seven individuals who shared this experience. Next, data was collected via interviews and analyzed for significant statements to describe the 'what' and the 'how' of the experience. To ensure adherence to standard number two, the phenomenon was articulated concisely as the VSU implementation experience. To ensure adherence to standard number three, procedures used for data analysis were consistent with the procedures associated with the phenomenological approach. This was achieved through a series of systematic steps and use of open coding. To ensure adherence to standard number four the significant statements were taken directly from those who had implemented a VSU to convey the overall essence of the experience. Lastly, to ensure adherence to standard number five, and remain reflexive throughout the study a journal was kept by the researcher as the means of communicating the researcher's assumptions, values, and relationship to the participants (see Burkholder et al., 2016). Journal excerpts demonstrating reflexive thoughts pertaining to potential biases by the researcher are included in (Appendix E).

## Summary

This qualitative study explored the experiences of those in the U.S. who have implemented the VSU model within their correctional institution. The qualitative theory that guided this study was phenomenology. The phenomenological method of research is used when one wishes to uncover common meaning from the perspectives of several individuals who have personally experienced a phenomenon (van Manen, 1990). In this study, the phenomenon to be understood was the experience of implementing a VSU

within a correctional facility. The specific phenomenological approach used to gain the essence of the experience of implementing a VSU was the transcendental approach (see Moustakas, 1994). Using in-depth interviews, the transcendental approach seeks to find the 'what' and 'how' of experience, to provide the essence of a phenomenon (Creswell, 2013). Additionally, the Quality Implementation Framework (QIF) of Meyers et al., (2012), was employed to provide insight into the actions associated with quality programming during the VSU implementation phase.

Seven U.S. correctional facility administrators from four different regions in the U.S. who had experienced the implementation of a VSU were asked to participate in the study. Participants were provided with time to ask questions and read and sign the informed consent before participating in the study. Open-ended, in-depth interviews were conducted to understand the correctional administrator's experiences while implementing their VSU. All data were transcribed and uploaded to the Quirkos qualitative research application for data management and analysis. Additionally, Creswell's (2013) phenomenological standards were employed to improve the quality of the study. Finally, in keeping with the traditions of phenomenology, bracketing was used to ensure transparency of the researcher's beliefs and observations during the collection of interview statements. Chapter 4 discusses the findings and analysis of the study.

Chapter 4: Results

**Introduction**

The purpose of this qualitative phenomenological study was to explore the implementation experiences of those who had developed VSUs within U.S. correctional facilities. This chapter presents the findings from in-depth interviews with correctional administrators regarding the experience of implementing a VSU. Since 2010, the number of VSUs has grown from less than a handful to well over 100 (NIC, 2019). The phenomenon of opening separate dorms for veteran inmates has received a significant amount of attention in the media and governmental reports (Edelman, 2018). Despite the support VSUs have received and calls for more to be implemented, the VSU program model remains underresearched. I did not find any empirical studies that had addressed the implementation of VSUs. In this chapter, I also describe the research instrument, setting, recruitment strategies, data collection processes, and data analysis used in this study.

A phenomenological method referred to as the transcendental approach was chosen as the qualitative methodology best suited to gain a deeper understanding of the phenomenon of VSU implementation through data collected from individuals with firsthand knowledge of VSU implementation and administration. Phenomenology is often used to uncover a collective meaning from the perspectives of several individuals who have personally experienced a phenomenon (Creswell, 2013). In this study, the phenomenon to be understood was the experience of implementing a VSU within a correctional facility. This approach involved conducting in-depth interviews to explore

the what and how of participants' experiences to identify the essence of the phenomenon. With the transcendental phenomenological approach, the researcher must follow a series of steps, including collecting data from several individuals, analyzing the data by reducing the information to significant statements, and combining those statements into themes to identify the essence of the phenomenon (Creswell, 2013; Moustakas, 1990).

The qualitative data for this study were collected by conducting in-depth telephone interviews with seven correctional administrators who had experienced the implementation and administration of a VSU. All interviews were conducted during August and September of 2019. Only individuals who identified as having experiential knowledge of VSU implementation and administration within a U.S. prison or jail were included in the study.

<div align="center">**Research Tools**</div>

A qualitative protocol was developed as the primary research tool to guide semistructured interviews (see Appendix B). The interview protocol consisted of seven demographic questions followed by 20 open-ended questions. The first section was designed to gather basic information, including the title and military experience of each participant, the date their VSU opened, the current and maximum capacities of each unit, and eligibility requirements for inmates to be placed in a VSU. The second portion of the interview protocol consisted of five sections focused on answering the two research questions:

RQ1: What have correctional administrators experienced in terms of implementing a veteran service unit?

RQ2: What context or situations influenced or affected correctional administrators' experiences as they implemented their veteran service unit?

## Data Collection

To answer the research questions, I developed a series of semistructured, open-ended interview queries from an interview protocol adhering to the traditions of phenomenology. Each interview question was constructed using the quality implementation framework (QIF) as a guide to gain insight into the VSU implementation experience in alignment with the features of quality program implementation. Furthermore, in observance of the QIF, the development of the interview protocol followed a template dictated by themes present in the four phases of the QIF. The 20 open-ended interview questions were crafted to elicit the participants' experiences of the VSU implementation phenomenon during each step of the QIF.

### Participant Selection

Purposeful sampling techniques were used to identify participants who knew about the phenomenon being studied. Participant selection began by contacting correctional facilities via email as to whether they had a separate unit within their facility for veteran inmates. The first list of correctional facilities was obtained through the National Sheriffs Association (NSA). The NSA shared their member email distribution list, which contained a few thousand email addresses from county law enforcement departments in all 50 U.S. states. From the NSA list, 2,539 VSU implementation inquiry emails were sent, to which 17 jails responded indicating their jail had implemented a separate housing unit for veterans. Additionally, the National Institute of Corrections

(NIC) website includes a list of all U.S. jails and prisons that have implemented separate housing for veterans within their facility. The NIC webpage states that there are 46 VSUs within U.S. jails and 76 VSUs within U.S. prisons (National Institute of Corrections, 2019).

Initially, a decision was made to limit study participants to those who had experienced implementing a VSU within the prison setting. However, after experiencing a low response rate from potentially qualified prisons, and after two participants from the prison setting dropped out, I decided to expand the participant pool to include implementers of VSUs in the jail setting. Potential participants who indicated they might be interested in discussing their VSUs were sent requests to participate in the study (see Appendix C). Potential participants also received an informed consent form and the list of questions they would be asked during the interview (see Appendix A). Participants were also given my contact information to set up a convenient date and time to complete the interview, and to ask additional questions.

A sample size of seven VSU administrators participated in semistructured interviews conducted by telephone. This number provided a large enough sample to answer the research questions and to reach data saturation. Each interview was audio-recorded. The average length of the interviews was 39 minutes. Care was taken not to report information that could potentially identify the participants or their locations. Prior to beginning the interviews, I informed participants that any purposeful or inadvertent mention of a correctional facility, administrator, staff member, or inmate would be redacted to protect the privacy of all individuals. On rare occasions during the interview

process when a privacy concern came up, I reminded the participants to refrain from providing information that could potentially identify inmates or their locations.

**Coding Analysis**

Coding analysis began with precoding each of the questions developed to provide insight into the four phases of the QIF. Also, general questions were added to reveal a deeper understanding of the context in which the VSUs were implemented. After using digital voice-to-transcription software to generate transcripts, I uploaded the transcripts into a qualitative proprietary application called Quirkos. This application facilitated the organization of data by allowing me to highlight and match the precoded text to the chosen scheme preferences. Once the data were categorized by color according to code, the program allowed me to run reports based on the selected key words and phrases.

The Quirkos program also provided easy-to-read graphics depicting the common themes and subthemes by pattern, and then displayed them in a variety of formats depending on preference. The split-screen view option provided additional utility by displaying the themes on the left, organized by color and size according to the number of comments in each category. The right side of the screen provided continued access to the corresponding color-coded interview statements. The program allowed for toggling between the seven transcripts. Employing this system facilitated the teasing out of the significant statements and themes from the raw data. The data were reviewed in depth six times. With each pass, the essence of the participants' VSU implementation experienced began to emerge through the refinement of categories and subcategories.

**Research Findings**

The following section presents the findings of the study. This section is divided into six sections. The first section presents demographic information regarding the background of the participants, such as job title and history with the military. Additional demographic information includes the individual characteristics of each VSU, such as time in existence, the current and maximum capacities of each unit, and VSU eligibility requirements. In the next four sections, I provide descriptive statements and phrases related to the experience of implementing a VSU, as guided by the four phases of the QIF. The last section includes six general questions designed to gather more textural descriptions related to implementing a VSU.

**Demographic Data**

This study was conducted using participants from four regions of the United States: one from the Northeast, three from the Midwest, two from the Southwest, and one from the West. Of the seven participants, five identified as administrating a VSU within the prison setting, and two identified as administrating a VSU within the jail setting. The first seven questions of the interview protocol captured pertinent demographic information on each participant and their VSUs. The participants' professional titles ranged from unit manager to deputy to associate warden. Three of the participants identified as female, and four identified as male. The month and year that each VSU opened ranged from October 2012 to January 2018 (see Table 1).

**Table 1**.

*VSU Participant Demographics*

| Participant ID<br>Setting<br>Title<br>Military background | Month/year VSU opened | Current (max) occupancy (% full) | Eligibility requirements |
|---|---|---|---|
| 01<br><br>Prison<br>Casework manager<br>Nonmilitary | November 2014 | 23/50 (46%) | Follow up with DD Form 214 |
| 02<br><br>Prison<br>Corrections manager & veterans coordinator<br>Military | May 2014 | 121/155 (78%) | enlisted whether shipped/stopped basic |
| 03<br>Jail<br>Administrative manager over programs<br>Nonmilitary | November 2017 | 6/40 (15%) | No max custody |
| 04<br><br><br>Prison<br>Deputy warden<br>Nonmilitary | September 2015 | 118/125 (94%) | General/honorable discharge, no max custody, discipline free |
| 05<br><br><br>Prison<br>Unit manager<br>Nonmilitary | October 2012 | 70/272 (26%) | Follow up with DD Form 214, discipline free |
| 06<br><br>Sergeant/program supervisor<br>Military | January 2018 | 8/40 (20%) | Pass risk assessment & interview |
| 07<br>Prison<br>Associate warden<br>Nonmilitary | January 2016 | 58/58 (100%) | None |

The maximum occupancy of each VSU ranged from housing a maximum of 40 veteran inmates up to a maximum of 272 inmates, with an average maximum occupancy of 106. Additionally, just one of the participants in the study reported that their VSU was currently at maximum capacity. The lowest current capacity reported was 15% full, with an overall average current capacity of 54%. All participants stated that eligibility for veteran inmates to be placed on the VSU was voluntary. The primary requirement for inmates to be placed on a VSU is that they must be a veteran. However, the definition of veteran varied somewhat. Also, each VSU required additional qualifiers depending on the individual, institutional policies, with only one of the seven participants requiring a general/honorable discharge from the military.

## Research Questions

### Phase 1: Initial Considerations Regarding the Host Setting

To gather rich contextual information related to Phase 1 of the implementation framework, initial considerations regarding the host setting, the first three questions addressed self-assessment strategies. To begin, the participants were asked to describe the purpose for and any situations that motivated or influenced the development of the veteran's unit? One hundred percent of the participant's responses included the naming one individual who was either a veteran or worked closely with veterans as the original 'champion' who had initiated the VSU, and 100% of the participants included the need to address veterans issues as being influential in the development of the VSU. Additionally, the desire to reduce recidivism rates among veterans was mentioned by 29% of participants.

03: We were looking for ways to combat recidivism rates… the Sheriff attended a national conference and met another sheriff who operates a VSU in his jail and became interested. He looked at it as a way to help veterans and also as a way to reduce recidivism at the same time.

04: There was a real need for this type of program…looking at the specific population of veterans who end up being lost in the community, we didn't have any programs that were specific to them within our prison system. Our goal is to reduce recidivism by 25% over a 10-year period.

The participants were asked to describe the process of physically creating the unit within your correctional facility. One hundred percent of the participants provided a version of a three-step process; a. choosing a space identified as being the most convenient logistically b. preparing the physical space to match the needs of the veteran population, and c relocating non-veterans out of the area and move veterans in.

01: We picked one dorm that was always considered the more well-behaved dorm. We had open beds, so we transferred the ones that weren't veterans into another unit and moved in the ones that were veterans.

03: The physical structure is a pod, not your traditional two-man cell like you would  normally think. There are three larger rooms. We emptied out all the bunks and just had one room to be a huge open, empty cell. Then a local company donated carpet and it was painted, that was the program room."

06: It was just a matter of deciding what pod and then going forward with getting it clean, identifying the inmates, and then starting the process of interviewing

them, and then getting them moved in and moving the non-vets out.

The third self-assessment strategy question was, how did you know when you were ready to move veteran inmates into your unit from the general population? All participants equated their readiness to open the VSU with the knowledge of capacity; the realization that their institution had both a significant number of veterans and enough room available to separate veterans into their unit. For two of the seven participants arriving at 'readiness' involved completing a formal and detailed planning process that considered both their internal and external stakeholders. The remaining five participants described knowledge of 'readiness' as a less formal process

> 03: We gave ourselves about a three-month window to prepare and get things ready. After, I called other institutions and asked them if they had similar programs and got some details as far as how they operated their program. I researched over the phone, in person, and online to put together what we thought would be a good program."

> 06: I went through and complete every one of those bullet points from the Barracks behind Bars report, making sure that I had everything covered in each section and had a plan in place. Then I briefed the leadership on it. I met several times over about a six-month period for updates. I had an inner group of the captain, lieutenant, and myself and a couple others, and we met and brainstormed and planned. Then I opened it up to a bigger group with mental health, medical, our veteran service officer, and the justice outreach officer, and then veterans court. That kind of brought everything together. Also, I briefed

the VA that's here in our county.

07: I just started with moving them (veteran inmates) in there and then working

with them to find out what their issues were. It was the inmates that completely

helped me develop it and come up with the ideas and the resources

To ascertain the participants' experiences related to decisions about adaptation,

the participants were asked was anyone else involved in the decision-making process to

begin the VSU? All participants indicated they had involved others in the decision-

making process to start the VSU. The experience of involving others ranged from

engaging their immediate superior only up to including a team of internal and external

stakeholders.

01: Yes, from our warden, the unit team manager, and the case worker.

02: Our administration was involved. The superintendent was a marine, we had a

lot of   motivation for opening the unit.

03: Yes, in law enforcement, as well as the military, we have a chain of

command.

07: Yes, the warden, but it was already rolling and going by then.

The final steps of Phase I involved several subsections related to capacity building

strategies including, buy-in, financial support, staffing the unit, and staff training. To

obtain information explicitly on the experience of securing buy-in, I asked the

participants when the unit was being developed was there a perception that the idea

needed to be pitched to gain support? Those responding 'yes' were then asked the follow-

up question was this to individuals from inside the organization, outside the organization,

or both, and tell me about the process to gain buy-in? Forty-three percent perceived they did not need to pitch the idea to gain support and, 57% did feel they needed to get buy-in before implementing the VSU.

05: No, once it was given the go ahead there really was not a lot of roadblocks from there. It was a matter of just promoting it, and getting the guys in, and getting it underway.

06: Yes, I sent out I think three emails to the entire Sheriff's office, and 600 and some to both civilians and deputies explaining where I was at in the process and the vision I had for the creation of the pod. And then as I move forward, I would include more information or new information. I kept everybody really informed and then by the time I sent my last email. I got 60 responses saying that they would love to work in the pod. Thirty of them weren't military either, so I was feeling pretty good about it."

To obtain information related to financial support for implementing the VSU, I asked the participants to tell me about any financial support received to implement the unit and its programs? All of the participants indicated that no financial support was received to implement the VSU.

02: We didn't need any money to implement the unit.

05: We didn't receive any special funds for the unit.

To obtain information regarding the experience of staffing the VSU, the participants were asked to describe the process that occurred to staff the veteran's unit? Of the seven participants, three indicated that staffing with employees who are also

veterans was a consideration. Four participants indicated that no additional staffing considerations were needed to implement the VSU.

> 03: there's no special assignment to work this area. Each day there might be 20 officers that work in a facility and two officers are assigned to that unit switching. So, any officer can be assigned to that area on any given day.

> 06: My first shift criteria are that it's a veteran that works that unit. For the second and third shifts, there is no criteria to be a veteran. I do that for a reason. I want the veterans in the pod to respect and be courteous even though that person is not a veteran. They're still in a position of authority and still in charge of that housing unit. The behavior should be the same, whether it's a veteran or not.

The final subcategory of Phase I pertains to the experience of staff training as a part of VSU program implementation. To gain insight into staff training, I asked the participants to tell me about any additional training received to work with the veteran population that the staff. Of the seven participants, none indicated formal or informal training had taken place before implementation. When asked a follow-up question regarding staff training following the implementation of the VSU, 57% of participants indicated no additional staff training had taken place. The remaining 43% stated the nature of the training following implementation had been informal and mostly involved passing down the experience of working with veterans to new staff.

> 01: A little bit here and there. So, the first custody officer was a veteran and he was already with the American Legion and took part in all that. So when I took over the casework part and the unit, I started working with the VA, and the

American Legion to kind of get me up to speed with everything about veterans,

what do they need, how can I help them, how can they get access to their

resources? So, there was no formal training   at that point.

02: The people offering workshops to the veteran inmates have received training

in how to do that. I wouldn't necessarily say it is training, but when information

becomes available our state trains the veteran's coordinator, and they forward to

us, and we share with our staff.

06: Not directly, like formal classes or anything, but videos, YouTube videos with

the different housing units throughout the United States, and a couple from the

prison  system and then some from jail vision. A lot of the training documentation

I've created, or I've been able to find. I reached out to another facility with a

VSU. I used that information to push out to staff and then just basically going

around and talking to people about it. They have questions about it. So, nothing

formal as far as training.

**Phase 2: Creating a Structure for Implementation**

Phase 2 of the QIF focuses on critical steps involved with the structural features

for implementation. This phase is further broken down into two critical steps: (a) creating

implementation teams and (b) developing an implementation plan. To gather contextual

information related to Phase 2, I asked the following open-ended question I'd like you to

think back before the implementation of the unit, tell me about the planning phase. For

example, the personnel involved and if the unit was based upon any specific design. All

seven participants shared that their experience included varying degrees of combined

formal and informal planning prior to VSU implementation. Additionally, 100% of

participants reported that they had included others in the planning phase. However, just

two participants reported that the design of their VSU was based off a previous design,

and both of those participants also stated that their model originated in another state.

01: We have open dormitory style, so we don't have jail cells or anything like

that. The design basically just came down to 'this is the space we have

available and it's upstairs. It gives them the best access to their caseworkers and

it's quiet. There was a bit of planning going on, trying to decide where it was

going to be located, how were we going to do it, how to keep track of the

veterans. A lot of it came down gathering information, resources, and who to

call for this and that, because it was kind of a new idea.

02: The people responsible for implementing it were myself and our

administration and the unit management team along with our officers. Without

them, it wouldn't have happened … it was more organic. We didn't have a

program for it in our state. It was kind of left to me. I tend to fly by my seat.

03: The VA approached me and said, are you aware of this program? It's called

Barracks behind Bars. And I wasn't. He provided me a copy from the national

Institute of corrections (NIC). It is a manuscript on basically how to create

everything, that took me probably six months to actually get through the whole

thing. And then after that I started working with my leadership, I was like this just

makes sense and it's time to make it happen. I took the lead on it and my

leadership has been supportive. I met several times over about a six-month period

for updates. I had an inner group of the captain, lieutenant, and myself and a

couple others, and we met and brainstormed and planned. Then I opened it up to a

bigger group with mental health, medical, the veteran service officer, and the

justice outreach. And then veterans court and kind of brought everything

together…I briefed the VA and then it was just a matter of deciding what pod or

what housing location, and then going forward.

07: I do not believe in reinventing the wheel. If there was another one out there

that was laid out on exactly what to do, I would have taken it and done that.

But no, there's not really a little manual on how to implement one into a

correctional facility, at least there wasn't in 2016. I presented the objectives of

my plan to my warden and was given the go ahead.

**Phase 3: Ongoing Structure Following Implementation**

Phase 3 of the QIF deals with the processes and strategies focused on the ongoing

structure once implementation begins. This phase is further broken down into three

critical steps (a) technical assistance/coaching/ and supervision, (b) process evaluation,

and (c) supportive feedback mechanisms. To ascertain the participants experiences

related to ongoing structure following implementation. I asked three questions. A variety

of responses were received to the first Phase 3 question; Does the unit receive any

assistance currently (resources, outside agencies, the VA, nonprofits, financial, and

other)?

O1: One VA outreach person travels around to the different facilities in state to

help offenders apply for their CMP claims, get documents for their DD 214,

housing assistance and basically just figures out what they qualify for. We also joined up with the VAs disabled veteran outreach program to help with stuff like employment or even vocational rehabilitation, to see if they qualify for additional benefits.

02: From a support standpoint, some of our inmate organizations have donated money.To purchase items like flags, copy paper, and stuff that the inmates use for their newsletters, and to purchase gloves, you know, white gloves for the honor guard ceremonies that they do. Our current unit manager has a slew of different people coming in to provide workshops and seminars, and information. We have a gentleman from the VA coming in he does PTSD groups     with some of our vets.

03 A veteran's group from the area donates their time and comes in to help us with programming. We work with a nonprofit organization, a more veteran-centric group that helps with veterans' services and veterans' treatment on the outside. Also, we partner with a Medicaid funded mentorship program. The mentorship program comes in and they train community members who are veterans to be mentors. If you get on veteran's court probation, you're teamed up with a mentor.

04: We have partnering agencies to support the program like the Department of Economic Security, the VA specialist, the local state university, and other different organizations that come in to add additional programs specific to the veteran population. We have the VA come in to do alcohol and drug anonymous programs, and we have a PTSD program specific for the veteran population which

is handled by a volunteer. Additionally, we have an offsite work assignment at the veteran's cemetery and the inmates that work out there are vets. We have partners from the community come in and talk about jobs and services, especially with the inmates that are closest to release. Also, the veterans compose a unit newspaper for the whole unit. They have an honor guard, a vegetable garden, and a flower garden. Oh, they're also doing peer-to-peer program.

05- We do have a dog program. Each dog that is brought into this dorm goes to a veteran. This is not just in our state, this is throughout the country. We get dogs brought in just to be trained; we have guys fly in from across the country to pick these dogs up from our facility. When the dog comes in, we'll already have a profile of the potential owner. Say this owner is in a wheelchair then we have wheelchairs in the dorm for our inmates to wheel around so the dog gets used to being around a wheelchair. We even have fake handicap buttons for automated doors in the unit, they train the dogs and they give them the command. That dog will go up and press that door. We do have some outside volunteers come in to speak with the inmates. But I guess one of the most common misconceptions probably throughout, I don't know if it's just our state, or if this is everywhere. I feel like when people hear veteran's unit, they think that there's a lot for them, like we cater to them. But we don't have a lot of things, like I said with not being solely a veteran unit, we still must keep it somewhat basic.

07: After our VSU was on a news story, a couple offered to donate $10,000 a semester for veterans for re-entry and college classes. Also, suicide prevention

classes and they get their own gym time, and they hold town hall meetings.

**Table 2.**

*Summary of VSU Resources*

| Government Partners | Nonprofit Partners (volunteers) | VSU Services Provided | VSU Activities |
|---|---|---|---|
| VJO | Veteran volunteers helping with reentry (housing, transportation, jobs) | Help with veterans' benefits | Publish unit newspaper |
| Disabled veterans | | Job training/ placement | |
| Outreach program | | | Townhall meetings |
| Medicaid | | GED/College courses | Letter writing to support troops |
| Dept. of Economic Security | American Legion | | Gardening |
| Medicaid | Faith based programs | PTSD group | Peer to peer programs |
| Veterans Treatment Court | | Veteran mentorship programs | |
| VA Specialists | | | Maintain veteran cemetery |
| State university | | Drug/alcohol meetings | Dog training/ Kitten fostering |
| | | Suicide prevention | |
| | | | Exercise/yoga |
| | | | Musical instruments |

To explore the participant's experience regarding program evaluation, I asked each participant to describe any processes currently in place to evaluate the success of the unit. Results revealed that 50% of the VSUs do some program evaluation, one VSU is presently in the process of beginning evaluations on their new program, and the remaining 50% stated that they currently do not have a program evaluation process in place.

07: (Yes) I do reports. For example, on the one-year anniversary I invited some administrators, and community partners in to report to them our successes. At that time, our maximum capacity was 55 inmates, and out of the 107 participants, 21 received a parole discharge. No participants had returned to date to receive a disciplinary rule infraction. Seven transferred to a drug and alcohol program, and 24 were moved from the program, and eight to minimum custody.

06: (In process) It's funny you say that. We haven't had anybody return. We've had some people leave, but we're right now working on the creation of an in-processing assessment or evaluation and then an out bound or an output processing assessment. We're trying to create that right now so that we can capture that data. But at this point I can tell you that nobody's returned. And one has been released. Based on our rosters, we average 40, and 40 was our max since January. Of those, several are on a bracelet or home release program, that's why we're down to eight that I call 'under roof'

01: (No)There's currently not and it's just the story of DOC. We are usually a little bit short staffed so it doesn't have the casework staffing that I would like it

to have. But we're still working on that. It's always running at its' best when

it has its own case worker because that case worker oversees running it and

make sure everything goes smooth. So, when there is not a case worker, it's

one of those extra hats and other person has to take on like the community

involvement coordinator.

03: (No) but I would say that on average, there is about a 10 to 15 percent

recidivism rate. (Of new arrest charges). This is well below the national average.

The last question of Phase 3 asked the participants to tell me about the support the

unit receives to sustain? Examples of participants' answers included:

01: The institution, the institutional organizations, our administrative

headquarters, and the inmates continue to have workshops.

03: Sustaining is basically through volunteers. Sustainability unfortunately is

dependent upon veterans continuing to commit crimes and be arrested. I started

something that we want to normally fight against, but at the same time I do need

people in the pod so it's kind of a catch 22. One thing that we are looking  at is to

partner with other agencies, in other smaller counties in the state, to let them

know that if they have veterans, they can send them here and we can house them

in our program.

005: We promote the VSU at orientation. I have a veteran inmate that goes to

every orientation twice a week and lets the new inmates know about the veteran's

unit.

**Phase 4: Improving Future Applications**

The focus of Phase 4 of the QIF is to improve future applications through learning from experience. To gather the participants' reflections on learning from experience as it relates to their VSU, I asked each participant to describe changes you have made or plan to make based upon your experiences since opening the unit. The participants provided a variety of answers touching on essential concepts to share such as, getting feedback from your program recipients to improve and sustain, continue to look for employment opportunities outside the box because this population of offenders is known to be more trustworthy and accountable, and to identify and separate out veteran inmates from the general population as early as possible after intake to increase their opportunities for success.

01: I've learned a lot. I take feedback from the guys (inmates). So, if they're looking for resources based on legal aid for veterans that's what I go out there to get them. Another is sometimes they just want that community feeling. So, I implemented having them complete and record a required amount of community service hours each month, then based on completion they'd get meals together like every 90 days if everybody has met the required hours.

04: There's a new work site offsite where the inmates are going to be dismantling airplanes. They could obtain once they're released because the specific company does hire civilians to do the same. I think that there's new jobs that are open to the population in the veteran unit because the inmate doesn't exhibit violence and follow the rules.

06: The hardest part of the whole implementation that I learned is get a hold of the vet as soon as possible. The sooner you can meet and greet the vet, the better chance you have of being successful and getting them to move into the vet's unit. Looking back, that's got to be one of the hardest challenges, is trying to grab people from these housing units from all over your facility of 800 to 2000 or whatever. I'm trying to get them to trust me, no matter how strong of a military background you have, and how many times you've deployed, you're wearing a badge and some people just cannot get past that.

**General Questions**

The previous sections of the interview protocol were constructed with the guidance of the QIF to purposely gather the conditions and situations experienced through the participant's structural descriptions related to implementing a VSU. The last section is comprised of six questions constructed to gather the textural descriptions related to implementing a VSU. The first general question asked the participants tell me what you are most proud of related to your VSU? One hundred percent of the participants expressed pride in their VSU, and 100% of participants shared that their feelings of pride were related to the impact the VSU program has had on the behavior of the veteran inmates.

01: I'm really proud of the veteran inmates' community involvement. They always are willing to take on. They're usually the most well-behaved group, but also, they're always wanting to see how they can do more, how can they help the community.

03: I'm not proud of myself so much, I'm proud of the changes that we've been

able to make for people and the innovation that we've brought to our industry.

I'm proud seeing these guys be able to really make a change to normal

behavior and the recidivism, the impact we've made on that.

04: I think for me personally, we're right at the four-year mark of success. I think

that the recidivism percentage speaks for itself. And just as a human being, you

know, sometimes when you talk to inmates, you see defeat. Just, they don't have

any self-confidence and you don't see that in the veterans so much. They're

working on themselves, actively working on themselves and I think that's the

biggest part of it.

The participants were then asked what were the most significant challenges you

experienced while implementing/operating your VSU? A majority of participants (57%)

stated that "buy-in" was a challenge during implementation; three of those participants

referred specifically to buy-in from inmates, and one referred to buy-in from the staff.

Twenty-nine percent of participants stated that their greatest challenge is managing space

and running out of room. One participant shared their feeling of disappointment when

having to move an inmate out of the VSU for cause is challenging. Getting volunteers to

help consistently was also mentioned by 29% as a secondary challenge.

03: Trying to get the guys to understand that we believe in the program. Like, it's

not a program that we had to roll out to look good to the community or for the

sheriff to get political credit. It's actually something that we care about. Now that

it has been going for a couple of years it's trying to get organizations and

volunteers in here.

01: The space. I'm sure it's probably across the board for most facilities. When it

first started, we had bed space available. Now the DOC projects the male facilities

to be out of room by, I believe spring. We're almost always completely at max

capacity. So, we have to put nonveterans in that unit sometimes because we just

need a bed. But the facility comes first.

The participants were asked what advice would you give to a colleague who

wanted to implement their own vet's unit? All participants recommended that those that

want to implement a VSU should 'go for it'. In order of frequency, additional statements

of advice to colleagues included taking the time to plan and research prior to

implementation (57%). Statements regarding the importance of selective staffing and

gaining buy-in were also mentioned (43%). Also, statements regarding the importance of

considering staffing and the room needed to implement and sustain a VSU was

mentioned by 29% of participants.

01: Be willing to deal with growing pains to try and make it happen.

02: I would suggest talking with people who already run a VSU…never give up…

and empower the inmates, granted you have to supervise but empower them.

03: There are two things. Number one is physical space; it's hard for a lot of

agencies to have the room available to run a veteran's program. We have this pod

that can hold 40 people we could hold 60 people if we didn't clear out all those

bunk beds. But we have a 40-bed pod that's only inhabited by six people right

now. That's kind of hard for some leaders to swallow in our business, there's

always overcrowding. The other thing is if this program is going to work you

have to have buy-in from the very top, if they buy in, then   everything else will

be good.

05: My advice would be to not rush it. To contact other facilities that already has

something intact. I do think it's important to have veterans staff working in that

unit, but we can't dictate that. A lot is union based when it comes to seniority and

stuff like that,  they can never mandate only veteran staff.

06- Take it slow and don't be afraid to reach out to your justice outreach

coordinator and the local VA too, and then obviously getting your administration

on board is huge.

07: Research it and get the buy in from the staff, find out who the key people are,

and, if  you can, make it a, "a warden's exempt position" to staff with people who

want to create this with you. You know, you don't want officers who just bid and

want to do their time in a unit. You want somebody who wants to be there. Once

you do the research, plan it out for the next shift bid. Let people know this. If you

can hand select who the staff are, put them in there and make sure that you have

the key personnel so that you set the bar high right out of the gate.

To the question do you consider your VSU to be successful? One hundred percent

of the participants answered in the affirmative. Some perceptions of VSU success

included:

03: For sure, and I hear it from the inmates themselves. One of the joys I get is

when I take them into the program. First thing I do is change out their orange

jumpsuit to the military fatigue. And I can't tell you how many times I've had

people put on camouflage fatigues and just take a huge sigh of relief or feeling

like they're back to being a part of something, back to that brotherhood that they

invested so much time and effort into that they feel a sense of belonging, a sense

of pride.

05: Yes, but there is a lot more we could offer.

The final questions were posed to ensure each participant was given the

opportunity to provide a comprehensive recollection of their VSU implementation

experience, the interview concluded by asking the participants open-ended questions in

alignment with the two broad research questions. To the question, is there anything else

you would like to share in terms of our own experience with implementing the unit? The

participant's answers were varied and thoughtful and provided deeper insight into the

essence of the experiences of implementing a VSU.

03: As we were getting ready to get started, I had the chance to work with

painting some of the murals that are up in our program. I built this program where

some of the murals were painted by my hand. There is a lot of personal

satisfaction and enjoyment that I get when I walk in there every day. This isn't

just a program, it's great to be a part of it and I'm appreciative and I'm

humbled by the opportunity to have something like this that's helping people.

04: I think that the way we did it was creative particularly with very little funding.

I actually think it worked out; the inmates themselves are facilitators of the

program because they take ownership and they come up with creative ideas. We

didn't let money stop us. We now know that it's not just the department of corrections in charge of reducing recidivism, it's the department of housing, the VA, all of those things, not just for the veterans, but for all the people that are involved, and I think that success is slowly increasing because of those partnerships.

06- One day I just was looking through some stuff online about veterans in jail and it  mentioned coloring books and color pencils. So, I bought $50 worth of coloring pencils and books. And it's been one of the greatest things you could have ever put in the pod. So, don't overlook the little things; caffeinated coffee or a battleship board game that we would never allow in another pod. It doesn't have to be a real huge cost. But the reward is immense.

07: Once you learn what their issues are, then you have a moral obligation, it is unique, they're not like the rest of the population that I did not know.

Just one participant wanted to add a statement to the question, were there any situations that influenced or affected your experience while implementing the unit that has not been covered so far?

04: I do think you should continue to seek out veteran related jobs because it's minimum custody and there are inmates eligible to work outside the unit while they're incarcerated. I think that support, their initiative to regain honor, and their initiative to work on themselves and their self-esteem. And, I think the partnerships with the universities and those types of organizations for education are very important and should continue.

**Evidence of Trustworthiness**

According to Creswell (2013), the criteria one should use to judge the quality of a phenomenological study is often found absent in the field. Therefore, in addition to ensuring this study was well-grounded and well supported, a series of steps to further extend reliability and validity, were implemented. The series of steps follow the five specific standards developed by Creswell (2013) and involve answering specific questions developed to assess quality. To ensure adherence to Standard 1, Does the author convey an understanding of the philosophical tenets of phenomenology? The philosophical tenants of phenomenology were conveyed within the study by first focusing on understanding the essence of the VSU implementation experience. Also, the unit analysis of seven participants who shared their experience was appropriate. Finally, in keeping with Standard 1, data was collected via interviews and analyzed for significant statements to describe the 'what' and the 'how' of the experience.

To ensure adherence to Standard 2, Does the author articulate the phenomenon in a concise way? The phenomenon was articulated concisely as 'the VSU implementation experience.' Next, to ensure Standard 3, Does the author use procedures of data analysis (e.g., systematic steps, open coding, etc.)? Procedures used for data analysis were consistent with the procedures associated with the phenomenological approach. The systematic steps used to get down to the essence of a shared phenomenon were followed.

Additionally, the procedures inherent in the four phases of the QIF served to ensure further that a systematic process of data analysis was conducted. To adhere to Standard 4, Does the author convey the overall essence of the experience of the

participants? Significant statements were taken directly from those who have implemented a VSU to convey the overall essence of the experience. Additionally, the experiences conveyed regarding the implementation of a VSU as further described in the context in which it occurred were addressed through the inclusion of several open-ended general interview questions designed to capture rich contextual data. Finally, to keep with Standard 5, Is the author reflexive throughout the study? A journal was kept by the researcher as the means of communicating the researcher's assumptions, values, and relationship to the participants (Burkholder, Cox, & Crawford, 2016). Journal excerpts demonstrating reflexive thoughts by the researcher are included in (See Appendix D).

## Summary

The purpose of this study was to explore the phenomenon of VSU implementation through the experiences of those with first-hand knowledge of VSU implementation. Chapter 4 provided an overview of the processes used to collect, manage, and analyze the data provided by VSU administrators who had experienced the implementation of a VSU within a U.S. correctional facility. In addition to the employment of the phenomenological approach, this study explored the experience of implementing a VSU through the lens of the QIF. Participants were selected based on purposeful sampling techniques, and all participants were informed of their rights and signed an informed consent before being interviewed.

The first research question explored what correctional administrators have experienced in terms of implementing a VSU. Several experiences emerged as being universal to all participants. Related to processes prior to implementation, all correctional

administrators indicated that one individual, often referred to as 'a champion,' had been

responsible for initiating the development of their VSU. However, all participants

indicated that other individuals were brought into the process to decide whether to

develop the VSU or not and into activities of planning the VSU. All study participants

expressed an awareness of 'implementation readiness,' which was closely tied to the

concept of "enough"; specifically, enough veterans intersecting with enough room to

support a separate unit. Additionally, all participants shared that no veteran-specific

training had taken place before implementation, and all participants indicated that no

additional funding was needed to implement their VSU. Following the implementation of

the VSU, all participants expressed the feeling of success primarily associated with a

marked decrease in recidivism rates. However, just 50% of VSU administrators indicated

they had conducted a formal evaluation to measure the program's ''success.

The second research question looked at situations that had influenced or affected

the participant's experience while implementing and administrating the VSU. All

participants shared the 'need' to address veterans' issues had been a motivating factor in

the development of their VSU. All participants stated that they experienced ongoing

challenges post-implementation. The most frequently mentioned challenges included

obtaining buy-in from both their staff and the inmates, issues of overcrowding or empty

beds in the VSU, and inconsistencies in dealing with volunteers.

Through a series of general questions, all VSU implementers expressed pride in

their units primarily related to the impact the VSU program appeared to have on the

behavior of the veteran inmates. The last section in Chapter 4 discussed the addition of

specific steps taken to ensure evidence of trustworthiness. Chapter 5 offers an

interpretation of the findings of the study, the limitations of the study, recommendations,

and social change implications.

Chapter 5: Discussion, Conclusions and Recommendations

**Introduction**

The purpose of this qualitative study was to explore the implementation

experiences of individuals who had developed VSUs within a U.S. correctional facility.

Since 2010, over 100 VSUs have been implemented within U.S. correctional facilities

(NIC, 2019). Despite the relatively rapid diffusion of this specialized correctional model

and the significant amount of attention VSUs have received in the media and reports from

governmental organizations (Edelman, 2018), there has been very little empirical

research on the implementation of the VSU correctional model. To explore the

experience of implementing a VSU, I used the method of transcendental phenomenology

(see Moustakas, 1994) as the best approach to discern the lived experiences of those who

had implemented a VSU in the United States.

Transcendental phenomenology was chosen over more inductive approaches

because of its focus on the lived experience of VSU implementation according to the

descriptions provided by the participants (see Creswell, 2013). The phenomenological

approach is predicated on following a series of steps, which include collecting data from

several individuals who have experienced the phenomenon, analyzing the data by

reducing the collected information into significant statements, and combining those

statements into themes. The themes that emerged are then interpreted to gain a deeper

knowledge of the what and how of the shared experiences (Creswell, 2013). VSU

implementation within U.S. correctional facilities is in its infancy. Therefore, it was

important to conduct a study focused on gaining a foundational understanding of VSU

implementation from which to build. This study was guided by the following research

questions:

RQ1: What have correctional administrators experienced in terms of

implementing a veteran service unit?

RQ2: What context or situations influenced or affected correctional

administrators' experiences as they implemented their veteran service unit?

**To answer the research questions, I conducted in-depth interviews**

**with seven** U.S. correctional administrators who have firsthand knowledge of

implementing a VSU. The interviews were conducted by phone and were recorded to

ensure verbatim transcription. The interview transcripts were downloaded into Quirkos to

manage the data. In this chapter, I interpret the themes identified in Chapter 4. This

section is followed by a discussion of the limitations of the study, recommendations for

future research, my experiences as the researcher, and implications for social change.

## Conceptual Framework

The quality implementation framework (QIF) of Meyers et al. (2012) was used to

provide the basis for data analysis and the interpretation of findings. Employing the QIF

helped me convey the essence of VSU implementation through the practical perspective

of implementation science. The interview questions were precoded to correspond with the

four phases of the QIF. Precoding with guidance from the QIF served to strengthen the

alignment of the study as I organized the data into emergent themes and patterns.

**Interpretation of Findings**

All study participants provided general background information by answering

several questions about their job title, military service, and the military service of their

staff. The participants were also asked general questions about their VSUs including how

many veteran inmates are currently housed in their units, the maximum number of

inmates their units will accommodate, the month and year their units opened, and the

requirements for VSU eligibility. All participants confirmed that their VSUs were

implemented within the last 10 years. The maximum occupancy of each VSU ranged

from 40 veteran inmates to 272 veteran inmates, with an average maximum occupancy of

106. Only one participant reported that their VSU was currently at maximum capacity. Of

the remaining six, the lowest percentage of current versus maximum was 15% full, and

the average current versus maximum was 54% full. All participants stated that VSU

eligibility for veteran inmates was voluntary. The primary requirement for inmates being

placed on the VSU was they must be a veteran. However, the definition of *veteran* varied.

Also, each of the VSUs in the study required additional eligibility qualifications for

placement on the VSU that depended on the individual policies of each institution. Only

one of the seven participants reported that their VSU eligibly was contingent upon having

received a general or honorable discharge.

**Quality Implementation Framework**

**Phase 1**

The purpose of the first QIF phase is to offer strategies designed to assess both the

host organization (prison/jail) and the program under consideration for implementation

(VSU). This is also the most involved and lengthy phase of the implementation process; if done well, this phase will provide a solid foundation on which to implement a quality program. Phase 1 of the QIF consists of several action steps organized into three subcategories: assessment, decisions about adaptation, and capacity building. All steps and subcategories within Phase 1 involve thoughtful consideration of the program's mission, the host organization's role in the proposed program, and the program recipients they aim to serve (Meyers et al., 2012).

Assessment in Phase 1 begins with this question: "Why are we doing this?" Based on the analysis of the in-depth interviews with VSU implementers, the participants experienced the question of why in two ways. First, all participants expressed a desire to develop a program that would address the common issues experienced by veteran inmates, including service-related mental health and substance abuse issues (see Crane et al., 2015; Hartley & Baldwin, 2019; Morgan et al., 2018), while simultaneously decreasing recidivism rates among veteran offenders (Tsai & Goggin, 2017). The second theme involved contact between two actors. The first individual acts as the catalyst who is motivated to see the VSU materialize. The second actor, often referred to in the literature as a champion for implementation, is often characterized as a "pragmatic corrections professional who takes the initiative to design, implement, and create sustainable veteran-specific programming" (Edelman, 2018, p. 9). Only 50% of the influential catalysts mentioned by the correctional professionals interviewed possessed a military background. Individuals helping to initiate VSUs have titles such as caseworker, veteran's coordinator, veteran's justice officer, and English professor. Only two of the

seven VSU implementers had served in the military. This finding was not consistent with the assumption that only those with a military background are interested in developing a VSU.

Phase 1 strategies also involve assessing an organization's capacity and readiness, referred to in the QIF as fit. This may include an evaluation of the organization's mission, goals, and cultural fit with the program being considered, or an evaluation of the physical fit between the organization and program. With VSU implementation, both types of fit must be considered; however, the fit between organizational mission and VSU mission is implicit due to the fact that the overall mission of U.S. correctional organizations is to enable inmates to successfully reintegrate into their community and correct behaviors that lead to re-incarceration (Edelman, 2018). Evaluating the physical fit between organization space and program needs was a more significant consideration for the VSU implementers. Confirming findings in the literature (see Blue-Howells et al., 2013; Edelman, 2018; Tsai & Goggin, 2017), all participants agreed that procuring additional space before implementing their VSU was not necessary. Nonetheless, collecting data on the total number of veterans in the institution, choosing a separate space to designate for veterans, and creating the appropriate environment to match the needs of veterans was a shared experience among all participants.

To gain more insight into the factors of readiness, I asked participants how they knew when they were ready to move veteran inmates on to the unit from the general population. The experience of readiness to implement the VSU was conveyed as being somewhat abstract by the participants. The responses ranged from "I just started with

moving them in there…it was the inmates that completely helped me develop it and come

up with the ideas and the resources" to one respondent outlining a comprehensive

planning process that involved several stages including regularly scheduled updates with

internal and external stakeholders. The wide variation in responses to this question

suggests knowledge of readiness is an individual experience that may be tied to the

organization's culture and commitment to implement a VSU (see Madsen, Miller, &

John, 2005).

     The QIF categories of decision-making and capacity building through buy-in

during Phase 1 are often when participants experience the need to involve others in the

implementation process. All participants reported that the decision to move forward with

the VSU and the need to obtain buy-in included others. The stakeholders sought by

participants to obtain buy-in included staff, inmates, and the community. Staff was

mentioned most frequently (72%) as the most important stakeholder to obtain buy-in

from. According to Boppre et al. (2018), buy-in from staff can affect a variety of work-

related behaviors, including receptivity to training and resistance to change. Gaining buy-

in from inmates (57%) was also considered necessary by the participants. Obtaining buy-

in from the community during the implementation phase was mentioned only twice. This

suggests that community buy-in has a role in VSU implementation but may not be

necessary to begin the process.

     Steps taken toward capacity building included financial and staffing concerns. All

participants stated that additional funds were not needed to start the VSU. This finding

was consistent with the literature indicating little to no startup costs for VSU

implementation, which is often cited as a reason for starting a VSU (Blue-Howell et al., 2013; Edelman, 2018; Seamone, 2019; Tsai & Goggin, 2017). All participants relied on existing personnel to staff the units, stating they did not feel the need to hire additional staff during the implementation phase. However, three of the seven participants (43%) shared that placing existing employees on the unit who possessed military experience was a consideration for them.

Despite nearly universal confirmation that training activities are a crucial component of improving program quality (see Baglivio et al, 2018; Boppre et al., 2018; Myers et al., 2012), 57% of the study participants indicated that no additional staff training took place. The remaining 43% described the nature of the training received by staff as informal and mostly involving passing down experiences from those who had worked with veterans on to the new staff assigned to unit. The following statement by a participant captures the essence of this finding: "I wouldn't necessarily say it is training, but when information becomes available, our state trains the veterans' coordinator, and they forward to us, and we share with our staff."

Several experts in the field have found that correctional officers have had to rethink the way they do their work as their roles have moved away from authoritarian and punitive measures toward therapy and rehabilitation (Andrews & Bonita, 2010; Rhine et al., 2006; Viglione et al., 2015). The training, time, and resources required to learn these new skills can be daunting as correctional staff assume the role of counselor and case manager (Munetz & Griffin, 2006; Salisbury et al, 2019; Taxman, 2008). As a result of these shifting roles, resistance can arise from correctional staff when they do not feel

valued in the decision-making process, are not given the time and resources for training, and do not understand how these changes will positively affect their work (Boppre et al., 2018).

**Phase 2**

The critical steps of developing an implementation a plan and creating implementation teams are the focus of the QIF in Phase 2. The two themes that emerged from questions associated with Phase 2 were that planning is necessary before implementation begins and enlisting the help of others is recommended. According to Myers et al., (2012) unless implementers have a deep understanding of implementation and program theory, they will need support and guidance. All participants shared the experience of involving others in the planning phases of their VSU. However, just two implementers reported that they had sought design guidance for their VSU based on an established VSU located in another region. For the five remaining participants, their planning experience fell in line with what Myers et al. (2012) refers to as following an emerging strategy involving the identification of what can be modified and what cannot. The findings in Phase 2 confirm the assumption that the emergence of VSUs occured primarily through the dissemination of informal communications between various leaders within correctional communities.

**Phase 3**

The steps associated with Phase 3 of the QIF are intended to transition VSU teams from the initial implementation into post-implementation. Also, Phase 3 is geared towards sustaining the VSU through the actions of obtaining program support, technical

assistance, and evaluating the program for effectiveness. All participants shared that operating their VSU involves the coordination of an assortment of resources in order to deliver veteran-specific programming. Furthermore, the participants shared that sustainability of their VSU is only made possible through a network of the collaborative partnerships they have forged with government agencies, volunteers, and nonprofit agencies (see Table 2).

The following excerpt from a participant statement provides a striking illustration of the participant's perspectives on sustainability:

Sustaining is basically through volunteers. Sustainability unfortunately is dependent upon veterans continuing to commit crimes and being arrested. I started something that we want to normally fight against, but at the same time I do need people in the pod so, it's kind of a catch 22. One thing that we are looking to do is partner with other counties in the state, to let them know that if they have veterans, they can send them here and we can house them in our program."

The experiences of evaluating the effectiveness of the VSU and the development of mechanisms for tracking program outcomes were found to be inconsistent among the participants, with just three of the seven VSU administrators reporting that they conduct an evaluation of their VSU. Justifiably, one study participant shared that the VSU team was in the process of beginning evaluation activities now that they are in their second year of operation. The remaining three participants stated they currently do not have a process in place to evaluate program effectiveness. The following are examples given for

reasons the participants had not conducted a program evaluation: "We are a little bit

short-staffed; I think the caseworker does that when we have one."

   "I would say that on average, there is about a 10 to 15 percent recidivism rate of

   new arrest charges…this is well below the national average."

"I personally do not, but there is someone somewhere who tracks all inmate

recidivism rates for the whole state"

The finding that half of the VSU administrators participating in the study do not

currently conduct program evaluations is concerning, but not surprising. Despite the fact

that several quality assurances metrics now exist to determine the extent to which

programs adhere to the evidence-based practices (EBPs) of offender rehabilitation

(Baglivio et al., 2018; Boppre et al., 2018; Gendreau & Andrews, 2001), there is little

information about how to build the organizational capacity necessary to successfully

achieve program quality and sustain innovations (Salisbury et al., 2019). Furthermore,

Viglione et al., (2015) asserts successful implementation of EBPs within correctional

organizations requires changing daily practices and aligning staff ideologies with the core

principles of EBP. For example, staff often do not understand how EBPs align with

current practices, the benefits of using EBPs, or how to use EBPs in their everyday

routine work.

**Phase 4**

Myers et al. (2012) established that over time, based on the experiences of

implementers and others involved, both mistakes and successes come together to shape

various concepts of what quality implementation should look like in Phase 4. Although

Phase 4 is the final phase in the QIF, it is not intended to be the terminal phase. The

visual representation of the QIF is a continuous cycle of quality improvement intended to

illustrate that each step in the framework should continue to be addressed by program

implementers throughout the implementation process (see figure 1). For example,

practitioners must remain flexible when considering factors such as logistical concerns

and available resources. As a result of statements gathered in Phase 4, several themes

emerged related to program changes VSU implementers have made or want to make

based on experience.

As the participants reflected on their VSU implementation experience, the

majority agreed it is important to integrate feedback into the program from the recipients

of the program (inmates). This finding affirms Goggin et al., (2018) suggestion that

capturing the perspectives of the veteran inmates, has the potential to offer greater

understanding into the benefits and challenges of implementing a VSU, and to inform

future development and refinement of the VSU model.

Additionally, throughout data collection, the participants often used terms such as

'calm', 'safe', 'trustworthy', and 'accountable' to describe the unique environment

created by housing veteran inmates separate from the general population. As a result of

this environment, more options were created to incorporate the kinds of therapeutic

activities typically not permitted within units that house the general population. This

included seemingly simple options such as providing board games, art supplies, musical

instruments, and movie nights, as well as, options considered to be of higher risk in the

correctional environment such as, gardening with utensils, boarding animals for service

training, peer to peer counseling programs, and inmate led meetings to provide input on programming.

Another theme related to Phase 4 involved the importance of identifying inmates having veteran status as early as possible after being processed into the facility. The participant's reasoned that by identify veteran inmates as soon as possible, may mitigate issues related to negative peer pressure from nonveterans. The following summary of a participants' statement highlights this challenge, and exemplifies the importance of remaining flexible throughout each phase of implementation:

We had one (inmate), after I explained everything to him, that he met the criteria. He was part of a gang outside of the jail and after I talked to him the next  day, he rescinded his request because some of the guys that were in his pod put a lot of heat on him about 'Hey, what are you doing?' 'Why are you going there?' They didn't even know he was in the military. Unfortunately, he said, I have to go back out to the street when I leave here. You're not going to be there. I couldn't argue with that. So, he declined.

Maximizing bed occupancy in the VSU was another universal theme identified through the exploration of the challenges experienced by VSU implementers. However, the circumstances surrounding each situation were unique. The two excerpts included below served to summarize the spectrum of complexities surrounding this issue. The first example demonstrates the experience of implementers who adhere to a strict 'veterans only' policy, developed during the decision-making phase of implementation, that is strengthened with authoritarian leadership each time the policy is challenged:

We have this pod that can hold 40 people, it could hold 60 people if we did not

clear out all those bunk beds. But we have a 40-bed pod that is only inhabited

now by six people. I tell people that challenge this "hey, if this program is going

to work you have to have buy-in from the sheriff". From the top, then everything

else will be good because there's been a lot of people questioning what I'm doing.

The second example demonstrates how innovation during the phases of

implementation can be adapted to fit contextual situations within the host setting (see

Meyers et al., 2019).

When it first started, we only housed veterans here. We'd have 23 veterans even

though we have 50 beds. Now, the DOC projects that the men's facilities will be

out of room by spring. So, now we must put nonveterans in that unit because we

just need a bed. We do try to make better choices like putting a crew

(nonveterans) in the unit that work at night, because they'll probably just sleep all

day. That's because we want the well-behaved guys in with the veterans. But the

facility needs space. We need a bed. That comes first. Right?

The final theme identified as a common challenge experienced among all VSU

implementers was the issue of keeping consistent volunteers and organizations coming in

to help with programming. This experience underscores the need to revisit and reinforce

capacity-building strategies introduced in Phase 2, particularly the fostering of supportive

communities, recruiting, and maintaining staff for counseling (see Myers et al., 2012).

Despite all participants confirming that they experience significant challenges

during and after the initial implementation of their VSUs, when participants were asked

what advice they would give to a colleague who wanted to implement their own VSU, all participants highly recommended that they 'go for it'. Also, all participants expressed that they felt proud of their VSU despite the challenges. There was 100% agreement among participants that their VSUs were a success. The reason most often cited for this perception is the marked reduction in recidivism witnessed by all participants.

## Limitations of the Study

There were several limitations to this study, including the first limitation of a small sample size. The limited sample size of seven participants may not truly represent the experiences of VSU implementers from the broader population. Secondly, the study was limited to a non-random sampling design, which restricts the ability to generalize the study findings. Thirdly, the study participants represented just four of the eight most commonly recognized geographical regions of the United States where VSUs have been implemented; therefore, the results may not be representative of the geographical makeup of VSUs implemented outside the areas included in the study. Fourthly, since there are currently no VSUs implemented for female inmates, the findings are restricted to VSUs housing male veteran inmates only. Additionally, the responses to the interview questions were self-reported by the participants in the study; therefore, there is the possibility of recall bias. Lastly, the study's findings were limited to VSUs housed within correctional departments that agreed to grant access to their employees have firsthand knowledge of implementing a VSU.

**Recommendations**

The qualitative and phenomenological nature of this study provided introductory insights into the experience of implementing a VSU. Admittedly, the phenomenon of VSU implementation is in its infancy. As such, there is scant literature to draw from which contributes to the numerous opportunities for continued research related to implementing specialized programming for veterans in the correctional setting. The exploration of VSUs through the lens of the QIF revealed a need for the development of more theory on VSU implementation; more qualitative information on the development of correctional interventions with a focus on outcomes for veteran offenders, and more quantitative information to advance correctional interventions proven to be effective.

Another recommendation is for continued research regarding U.S. correctional practitioners and the state of education and training to work with veteran offenders. Similarly, more research is needed on the correctional practitioner's role in the collection and tracking of outcomes for veteran offenders. This study also identified challenges correctional practitioners experience concerning the use of outside partners and volunteers to deliver veteran-specific programming. However, to fully understand the complex relationship between correctional facilities and outside agencies more research is needed.

From an organizational perspective, research is needed on influence and consequences overcrowding has on separate and specialized housing units. From the community perspective, studies on services to benefit veterans re-entering into the community from the VSU environment would be beneficial. Lastly, from a policy

perspective, more studies are needed on the impact VSU have on veteran offender recidivism rates.

## Researcher's Experience

To reduce bias, bracketing was used. Bracketing is a technique used to incorporate a discussion of the researchers' personal experiences with the phenomenon being studied. These acknowledgments of bias serve to "bracket" the researcher, as it is referred to in the tradition of phenomenology. The purpose of bracketing is to allow the focus to remain on the participant's experiences in a very intentional way. To improve objectivity, before beginning the data collection phase, preconceived notions about the experience of implementing a VSU were identified. A research journal was also kept and employed primarily during data collection, as recognized thoughts of personal bias arose, notations were made in the field notes regarding awareness of the researcher's biases. This technique acted to strengthen efforts to remain objective and reinforced the awareness of biases as they presented.

## Implications for Social Change

Based on results collected through the illumination of a framework developed explicitly to improve the quality of programming, findings from this study may help to bridge the gap between science and the practice of program implementation by providing correctional administrators with a deeper understanding of implementation strategies associated with improved outcomes. As a result of the deductive strategies offered through the chosen approach for this study, correctional administrators are provided with

prescriptive practices, and additional tools intended to guide the implementation process while increasing the likelihood of developing more effective VSUs.

By increasing the number of VSUs implemented in the United States, the number of opportunities to effectively address the unique needs of veteran offenders may increase. Furthermore, those communities reintegrating the veterans who have received the specialized programming uniquely offered in the VSU environment may yield the kinds of quality of life improvements that come from a decrease in crimes which are often associated with the psychological trauma, and emotional, and substance use issues suffered by many justice-involved veterans.

## Summary

Based on the analysis of data provided through the collection of shared experiences of those involved in implementing VSUs, I was able to answer the two board research questions that guided this study. The exploration of the essence of what it is like to implement a VSU, and the situations that affected the implementation experience were also informed by the 4 phases of the QIF. Regardless of military background, the results of this study made apparent that VSU implementers are motivated by their desire to find innovative ways to make a positive and long-lasting impact on the unique problems faced by many veterans. Additionally, VSU implementers understand that creating a separate unit for veterans has a profound, and nearly immediate, effect on reducing recidivism, and requires little to no startup funding. Furthermore, the essence of implementing a separate unit for veterans is an involved process, that is comprised of several steps including a thorough assessment of the organizations culture and resources, determining

the number of inmates with veteran status, coordinating and sustaining a number of specialized programming activities, and obtaining buy-in from all stakeholders.

The first notable departure from the steps of QIF was found in Phase 1; consideration of 'effective staff training' for those working with veterans. Although VSU administrators did not explicitly state that staff training was a component of their capacity building efforts, most stated that the sharing of information occurred as a way of being more effective when working with veterans. Also, all VSU implementers understood the need to continue to cultivate a network of collaborative partnerships, albeit with a hodgepodge of governmental agencies, volunteers, and nonprofit agencies to continue to provide veteran-specific programming.

Relative to the second and third phases of the QIF, findings indicated that VSU implementers did devise plans for VSU development and did gather teams in order to complete the implementation phase. However, just half of the participants in the study stated they conducted evaluations on the effectiveness of their VSU which indicates a second departure from VSU implementation practices associated with quality.

Findings from the fourth phase of the QIF closely align with building the organizational capacity necessary to successfully achieve program quality and sustain innovations (see Salisbury et al., 2019). The acknowledgment that challenges will arise during each phase of implementation is necessary. According to the recommendations found within the QIF, VSU implementers who leverage those challenges as they arise serve to improve future applications (see Meyers et al., 2012). Further findings indicate that VSU implementers should anticipate dealing with issues surrounding fluctuations in

the allocation of beds. Moreover, implementers should anticipate the nature of these challenges will be directly affected by a limited or overabundance of space, the total number of veteran inmates, and the amount of institutional support for the VSUs' mission.

Finally, depending on inmate intake and processing procedures, findings suggest it is essential to quickly identify and capture the inmates with veteran status prior to allowing them settling in with the general population for any length of time. Despite the challenge's correctional administrators experienced while implementing their VSU, all agreed it was a rewarding endeavor, and an inexpensive way to make a positive and long-lasting impact on the unique problems many veterans face.

References

Adams, R. E., Urosevich, T. G., Hoffman, S. N., Kirchner, H. L., Figley, C. R., Withey,

    C. A.,…Boscarino, J. A. (2019). Social and psychological risk and protective

    factors for veteran well-being: The role of veteran identity and its implications for

    intervention. *Military Behavioral Health*, 1-11. doi:

    10.1080/21635781.2019.1580642

Albertson, K., Banks, J., & Murray, E. (2017). Military veteran-offenders: Making sense

    of developments in the debate to inform service delivery. *Prison Service Journal,*

    *234*, 23-30. Retrieved from https://www.crimeandjustice.org.uk/publications/psj

Andrews, D. A., & Bonita, J. (2010). Rehabilitating criminal justice policy and practice.

    *Psychology, Public Policy, and Law*, *16*(1), 39. doi:10.1037/a0018362

Andrews, D. A., Zinger, I., Hoge, R. D., Bonta, J., Gendreau, P., & Cullen, F. T. (1990).

    Does correctional treatment work? A clinically relevant and psychologically

    informed meta-analysis. *Criminology*, *28*(3), 369-404. doi:10.1111/j.1745-

    9125.1990.tb01330.x

Arno, C. (2014). Proportional response: The need for more-and more standardized-

    veterans' courts. *University of Michigan, Journal of Law Reform, 48,* 1039.

Astbury, B. (2008). Problems of implementing offender programs in the community.

    *Journal of Offender Rehabilitation, 46*(3-4), 31-47.

    doi:10.1080/10509670802143235

Baglivio, M. T., Wolff, K. T., Jackowski, K., Chapman, G., Greenwald, M. A., &

    Gomez, K. (2018). Does treatment quality matter? Multilevel examination of the

effects of intervention quality on recidivism of adolescents completing long-term

juvenile justice residential placement. *Criminology & Public Policy, 17*, 147-18

doi:10.1111/1745-9133.123380.

Baker, S. E., Edwards, R., & Doidge, M. (2012). How many qualitative interviews is

enough? Expert voices and early career reflections on sampling and cases in

qualitative research. Retrieved from

http://eprints.brighton.ac.uk/11632/1/how_many_interviews.pdf

Baldwin, J. M. (2015). Investigating the programmatic attack: A national survey of

veteran's treatment courts. *Journal of Criminal Law & Criminology, 105*, 705-

752. Retrieved from https://scholarlycommons.law.northwestern.edu

Baldwin, J. M., & Brooke, E. J. (2019). Pausing in the wake of rapid adoption: A call to

critically examine the veteran's treatment court concept. *Journal of Offender*

*Rehabilitation,* 1-29. doi:10.1080/10509674.2018.1549181

Baldwin, J. M., & Rukus, J. (2015). Healing the wounds: An examination of veterans

treatment courts in the context of restorative justice. *Criminal Justice Policy*

*Review, 26*(2), 183-207. doi:10.1177/0887403413520002

Bernardy, N. C., Hamblen, J. L., Friedman, M. J., & Kivlahan, D. R. (2011). Co-

occurring posttraumatic stress disorder and substance use disorder:

Recommendations for management and implementation in the Department of

Veterans Affairs. *Journal of Dual Diagnosis, 7,* 242-261.

doi:10.1080/15504263.2011.620446

Blodgett, J. C., Avoundjian, T., Finlay, A. K., Rosenthal, J., Asch, S. M., Maisel, N. C.,

& Midboe, A. M. (2015). Prevalence of mental health disorders among justice-involved veterans. *Epidemiologic Reviews, 37*(1), 163-176. doi:10.1093/epirev/mxu003

Blonigen, D. M., Bui, L., Elbogen, E. B., Blodgett, J. C., Maisel, N. C., Midboe, A. M.,…Timko, C. (2016). Risk of recidivism among justice-involved veterans: A systematic review of the literature. *Criminal Justice Policy Review*, *27*(8), 812-837. doi:10.1177/0887403414562602

Blonigen, D. M., Rodriguez, A. L., Manfredi, L., Britt, J., Nevedal, A., Finlay, A. K.…Timko, C. (2017). The availability and utility of services to address risk factors for recidivism among justice-involved veterans. *Criminal Justice Policy Review, 28*(8), 790-813. doi:10.1177/0887403416628601

Blue-Howells, J. H., Clark, S. C., van den Berk-Clark, C., & McGuire, J. F. (2013). The US Department of Veterans Affairs Veterans Justice Programs and the sequential intercept model: Case examples in national dissemination of intervention for justice-involved veterans. *Psychological Services, 10*(1), 48. doi:10.1037/a0029652

Boppre, B., Sundt, J., & Salisbury, E. J. (2018). The limitations and strengths of the Evidence-Based Practice Attitude Scale as a measure of correctional employees' attitudes: A psychometric evaluation. *International Journal of Offender Therapy and Comparative Criminology, 62*(12), 3947-3964. doi:10.1177/0306624X17749450

Boscarino, J. A. (2006). Posttraumatic stress disorder and mortality among US Army

veterans 30 years after military service. *Annals of Epidemiology*, *16*(4), 248-256. doi:10.1016/j.annepidem.2005.03.009

Bourgon, G., & Armstrong, B. (2005). Transferring the principles of effective treatment into a "real world" prison setting. *Criminal Justice and Behavior, 32*(1), 3-25. doi:10.1177/0093854804270618

Bozeman, B. (1993). A theory of government "red tape." *Journal of Public Administration Research and Theory*, *3*(3), 273-304. Retrieved from https://academic.oup.com/jpart

Bronson, J., Carson, A., Noonan, M., & Berzofsky, M. (2015). *Veterans in prison and jail, 2011–12*. Washington, DC: Office of Justice Programs, Bureau of Justice Statistics. Retrieved from https://www.bjs.gov/

Burkholder, G. J., Cox, K. A., & Crawford, L. M. (Eds.). (2016). *The scholar-practitioner's guide to research design.* Baltimore, MD: Laureate Publishing. Carroll, C., Patterson, M., Wood, S., Booth, A., Rick, J., & Balain, S. (2007). A conceptual framework for implementation fidelity. *Implementation science*, *2*(1), 40. doi:10.1186/1748-5908-2-40

Cavanaugh, J. M. (2010). Helping those who serve: Veterans treatment courts foster rehabilitation and reduce recidivism for offending combat veterans. *New Eng. L. Rev.,45*, 463. Retrieved from https://newenglrev.com/

Center, G. A. I. N. S. (2008). Responding to the needs of justice-involved combat veterans with service-related trauma and mental health conditions. Retrieved from http://gainscenter.samhsa.gov/text/veterans/Responding_to_Needs.asp.

Coy, P. G., Woehrle, L. M., & Maney, G. M. (2008). Discursive legacies: The US peace movement and "support the troops". *Social Problems, 55*(2), 161-189. doi:10.1525/sp.2008.55.2.161

Crane, C. A., Schlauch, R. C., & Easton, C. J. (2015). Dual diagnosis among veterans in the United States. *Advances in Dual Diagnosis, 8*(1), 4-17. doi:10.1108/ADD-09-2014-0035

Creswell, J.W. (2013). *Qualitative Inquiry and Research Design: Choosing among five approaches* (3rd ed.). Los Angeles, CA: Sage.

Cullen, F. T., & Gendreau, P. (2000). Assessing correctional rehabilitation: Policy, practice, and prospects. *Criminal justice*, *3*(1), 299-370. Retrieved from http://ncjrs.gov

Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science, 4,* 50. doi:10.1186/1748-5908-4-50

DeLeon, P. (1999). The missing link revisited: Contemporary implementation research. *Review of Policy Research, 16*(3-4), 311-338. doi:10.1111/j.1541-1338.1999.tb00887.x

Dougan, C., & Weiss, S. (1988). *The American Experience in Vietnam*. WW Norton.

Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation. *American journal of community psychology, 41*(3-4), 327-350.

doi:10.1007/s10464-008-9165-0

Edelman, B. (2018, May). *Barracks behind bars: In veteran-specific housing units, veterans help veterans help themselves.* Washington, DC: National Institute of Corrections. Retrieved from https://info.nicic.gov/jiv/node/121

Finlay, A. K., Owens, M. D., Taylor, E., Nash, A., Capdarest-Arest, N., Rosenthal, J., ... & Timko, C. (2019). A scoping review of military veterans involved in the criminal justice system and their health and healthcare. *Health & Justice, 7*(1), 6. doi:10.1186/s40352-019-0086-9

Finlay, L. (2009). Debating phenomenological research methods. *Phenomenology & Practice, 3*(1), 6-25. doi:10.29173/pandpr19818

Fixsen, D. L., & Fixsen, A. A. (2016). An integration and synthesis of current implementation frameworks. Retrieved from Chapel Hill, NC: National Implementation Research Network. Retrieved from https://www.ojp.gov/docs/fixsenintegrateframe.pdf

Flatley, B., Clark, S., Rosenthal, J., & Blue-Howells, J. (2017). Veterans Court Inventory 2016 Update: Characteristics of and VA involvement in Veterans Treatment Courts and other Veteran-focused court programs from the Veterans Justice Outreach Specialist Perspective. U.S. Department of Veterans Affairs. Washington, D.C. Retrieved from https://www.va.gov/HOMELESS/docs/VJO/2016-Veterans-Court-Inventory-Update-VJO-Fact-Sheet.pdf

Flick, U. (2018). *An introduction to qualitative research (*4ᵗʰ ed*.)*. Sage Publications

   Limited.

Frankfort-Nachmias, C., & Nachmias, D. (2008). *Research methods in the social sciences*

   (5th ed.). New York, NY: Worth.

Gendreau, P., & Andrews, D. A. (1994). *The correctional program assessment inventory*.

   Saint John, New Brunswick, Canada: University of New Brunswick.

Gideon, L. (2013). Introduction: Special needs offenders. In L. Gideon (ed.), *Special*

   *needs offender in correctional institutions* (pp. 1-20). Thousand Oaks, CA: Sage.

Giorgi, A. (1997). The theory, practice, and evaluation of the phenomenological method

   as a qualitative research procedure. *Journal of phenomenological psychology,*

   *28*(2), 235-260. doi:10.1163/156916297X00103

Giorgi, A. (2006). Difficulties encountered in the application of the phenomenological

   method in the social sciences. *Análise Psicológica, 24*(3), 353-361.

   doi:10.14417/ap.175

Goggin, E., Mitchell, L., & Tsai, J. (2018). Experiences of Incarcerated Veterans in an

   All-Veterans Housing Unit: A Qualitative Study. *Psychological Injury and Law,*

   *11*(4), 394-402. doi:10.1007/s12207-018-9332-z

Greenberg, G. A., & Rosenheck, R. A. (2012). Incarceration among male veterans:

   Relative risk of imprisonment and differences between veteran and nonveteran

   inmates. *International Journal of Offender Therapy and Comparative*

   *Criminology, 56*(4), 646-667. doi:10.1177/0306624X11406091

Greenhalgh, T., Robert, G., MacFarlane, F., Bate, P., & Kyriakidou, O. (2004). Diffusion

of innovations in service organizations: Systematic review and recommendations. *Milbank Quarterly, 82,* 581–629. doi:10.1111/j.0887-378X.2004.00325.x

Griffith, R. K. (1997). *The US Army Transition to the All-Volunteer Force, 1968-1974*(p. 2569). Center of Military History. Retrieved from https://history.army.mil/html/books/030/30-18-1/cmhPub_30-18-1.pdf

Hartley, R. D., & Baldwin, J. M. (2019). Waging war on recidivism among justice-involved veterans: An impact evaluation of a large urban veteran's treatment court. *Criminal Justice Policy Review, 30*(1), 52-78. doi:10.1177/0887403416650490

Hawkins, M. D. (2009). Coming home: Accommodating the special needs of military veterans to the criminal justice system. *Ohio State Journal of Criminal Law, 7,* 563-573. Retrieved from https://heinonline.org/HOL/LandingPage?handle=hein.journals/osjcl11&div

Hearst, N., Newman, T. B., & Hulley, S. B. (1986). Delayed effects of the military draft on mortality. *New England Journal of Medicine, 314*(10), 620-624. doi:10.1056/NEJM198603063141005

Hupe, P. (2014). What happens on the ground: Persistent issues in implementation research. *Public Policy and Administration, 29*(2), 164-182. doi:10.1177/0952076713518339

Huskey, K. A. (2017). Justice for Veterans: Does Theory Matter. *Arizona Law Review, 59,* 697. Retrieved from http://arizonalawreview.org/pdf/59-3/59arizlrev697.pdf

Johnson, D. R., Lubin, H., Rosenheck, R., Fontana, A., Sonthwick, S., & Charney, D.

(1997). The impact of the homecoming reception on the development of

posttraumatic stress disorder: The West Haven Homecoming Stress Scale

(WHHSS). *Journal of Traumatic Stress, 10*(2), 259-277.

doi:10.1002/jts.2490100207

Knudsen, K. J., & Wingenfeld, S. (2016). A specialized treatment court for veterans with

trauma exposure: Implications for the field. *Community mental health

journal*, *52*(2), 127-135. doi:10.1007/s10597-015-9845-9

Schlenger, W. E., Kulka, R. A., Fairbank, J. A., Hough, R. L., Kathleen Jordan, B.,

Marmar, C. R., & Weiss, D. S. (1992). The prevalence of post-traumatic stress

disorder in the Vietnam generation: A multimethod, multisource assessment of

psychiatric disorder. *Journal of Traumatic Stress*, *5*(3), 333-363.

Lipsey, M. W., Landenberger, N. A., & Wilson, S. J. (2007). Effects of cognitive-

behavioral programs for criminal offenders. *Campbell systematic reviews, 3*(1), 1-

27. doi: 10.1002/CL2.42

Lowenkamp, C. T., Latessa, E. J., & Smith, P. (2006). Does correctional program quality

really matter? The impact of adhering to the principles of effective intervention.

*Criminology & Public Policy, 5*(3), 575-594. doi:10.1111/j.1745-

9133.2006.00388.x

Lucas, P. A., & Hanrahan, K. J. (2016). No soldier left behind: The veterans court

solution. *International journal of law and psychiatry, 45*, 52-59. doi:

10.1016/j.ijlp.2016.02.010

MacKenzie, D. L. (2008). Structure and components of successful educational programs

*Reentry Roundtable on Education, John Jay College of Criminal Justice, New York, March 31.* Retrieved from educationjustice.net

Madsen, S. R., Miller, D., & John, C. R. (2005). Readiness for organizational change: do organizational commitment and social relationships in the workplace make a difference? *Human Resource Development Quarterly, 16*(2), 213-234. doi:10.1002/hrdq.1134

Mason, M. (2010, August). Sample size and saturation in PhD studies using qualitative interviews. In *Forum qualitative Sozialforschung/Forum: qualitative social research* (Vol. 11, No. 3). Retrieved from qualitative-research.net

Mazmanian, D. A., & Sabatier, P. A. (1983). *Implementation and public policy.* Scott Foresman.

McCall, J. D., Rodriguez, K. L., Barnisin-Lange, D., & Gordon, A. J. (2019). A qualitative examination of the experiences of veteran's treatment court graduates in Allegheny County, Pennsylvania. *International journal of offender therapy and comparative criminology*, *63*(3), 339-356. doi:10.1177/0306624X18801462

McCall, J. D., Tsai, J., & Gordon, A. J. (2018). Veterans Treatment Court research: Participant characteristics, outcomes, and gaps in the literature. *Journal of Offender Rehabilitation, 57*(6), 384-401. doi:10.1080/10509674.2018.1510864

McFall, M. E., Mackay, P. W., & Donovan, D. M. (1992). Combat-related posttraumatic stress disorder and severity of substance abuse in Vietnam veterans. *Journal of studies on alcohol, 53*(4), 357-363. doi:10.15288/jsa.1992.53.357

McGuire, J. (2007). Closing a front door to homelessness among veterans. *The Journal of*

*Primary Prevention, 28*(3-4), 389-400. doi:10.1007/s10935-007-0091-y

Meyers, D. C., Durlak, J. A., & Wandersman, A. (2012). The quality implementation framework: A synthesis of critical steps in the implementation process. *American journal of community psychology, 50*(3-4), 462-480. doi:10.1007/s10464-012-9522-x

Miller, J. M., & Miller, H. V. (2016). Validating program fidelity: lessons from the Delaware County second chance initiatives. *American Journal of Criminal Justice, 41*(1), 112-123. doi:10.1007/s12103-015-9325-3

Montgomery, L. M., & Olson, J. N. (2018). Veterans Treatment Court Impact on Veteran Mental Health and Life Satisfaction. *Journal of Psychology, 6*(1), 1-4. doi:10.15640/jpbs.v6n1a1

Morgan, M. A., Logan, M. W., & Cullen, F. T. (2018). The Battlefield Behind Bars: How Mental Disorder and Suicidal Behavior Impacts the Prison Experience for Veterans. American *Journal of Criminal Justice*, 1-24 Retrieved from https://link.springer.com/journal/12103

Moullin, J. C., Sabater-Hernández, D., Fernandez-Llimos, F., & Benrimoj, S. I. (2015). A systematic review of implementation frameworks of innovations in healthcare and resulting generic implementation framework. *Health Research Policy and Systems*, *13*(1), 16. doi:10.1186/s12961-015-0005-z

Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage

Munetz, M. R., & Griffin, P. A. (2006). Use of the sequential intercept model as an approach to decriminalization of people with serious mental illness. *Psychiatric*

*services, 57*(4), 544-549. doi:10.1176/ps.2006.57.4.544

Nagin, D. S., Cullen, F. T., & Jonson, C. L. (2009). Imprisonment and reoffending.

*Crime and justice*, *38*(1), 115-200. doi:10.1086/599202

National Institute of Corrections (2019). Washington, D.C. Retrieved from

https://info.nicic.gov/juv

National Sheriffs Association (n.d.). Alexandria, VA. Retrieved from

http://www.sheriffs.org

Nilsen, P. (2015). Making sense of implementation theories, models and frameworks.

*Implementation science*, *10*(1), 53. doi.org/10.1186/s13012-015-0242-0

O'Toole Jr, L. J. (2004). The theory–practice issue in policy implementation research.

*Public administration, 82*(2), 309-329. doi:10.1111/j.0033-3298.2004.00396.x

Patton, M. Q. (2015). *Qualitative research & evaluation methods: Integrating theory and*

*practice* (4th ed.). Thousand Oaks, CA: Sage.

Pew Research Center. (n.d.). Washington D.C. Retrieved from

https://www.pewresearch.org/fact-tank/2018/05/02/americas-incarceration-rate-is-

at-a-two-decade-low

Quirkos (n.d.) Retrieved from https://www.quirkos.com/index.html

Rhine, Mawhorr, & Parks (2006) Implementation: The bane of effective correctional

programs. *In Criminology and Public Policy, 5*(2) p. r 347-358.

doi:10.1111/j.1745-9133.2006.00382.x

Riddell, T. (1970). The economic effects of the war in Vietnam. *Review of Radical*

*Political Economics, 2*(3), 41-72. doi:10.1177/048661347000200306

Rodriguez, A. L., Manfredi, L., Wong, A. C., Nevedal, A., Timko, C., Rosenthal, J., & Blonigen, D. M. (2017). Implementation Potential of Structured Risk Assessments for Criminal Recidivism in the Veterans Health Administration: Qualitative Perspectives from Providers. *Criminal Justice Policy Review*, 0887403417725567. doi:10.1177/0887403417725567

Rogers, E.M., (1995). *Diffusion of innovations.* New York, 12.

Rosenthal, J., & McGuire, J. (2013). Incarcerated veterans. In L. Gideon (Ed.), *Special needs offenders in correctional institutions* (pp. 345-376). Thousand Oaks, CA: Sage

Rostker, B. D., & Yeh, K. C. (2006). I want you: The evolution of the All-Volunteer Force..Rand Corporation. Retrieved from https://www.rand.org/content/dam/rand/pubs/monographs/2007/RAND_MG265.pdf

Rubin, H. J., & Rubin, I. S. (2011). *Qualitative interviewing: The art of hearing data*. Thousand Oaks, CA: Sage.

Rudestam, K. E., & Newton, R. R. (2015). *Surviving your dissertation: A comprehensive guide to content and process* (4th ed.). Thousand Oaks, CA: Sage.

Russell, R. T. (2009). Veterans treatment court: A proactive approach. *New England Journal on Criminal and Civil Confinement, 35*, 357. Retrieved from http://HeinOnline

Rycroft-Malone, J. (2004). The PARIHS framework: A framework for guiding the implementation of evidence-based practice. *Journal of Nursing Care Quality, 19*,

297–304. doi:10.1097/00001786-200410000-00002

Salisbury, E. J., Sundt, J., & Boppre, B. (2019). Mapping the Implementation Landscape:
Assessing the Systemic Capacity of Statewide Community Corrections Agencies
to Deliver Evidence-Based Practices. *Corrections, 4*(1), 19-38.
doi:10.1080/23774657.2018.1522279

Schwartz, S., & Levitas, L. (2011). Restorative justice for veterans: The San Francisco
Sheriff's Department's Community of Veterans Engaged in Restoration
(COVER). *Washington University Journal of Law and Policy, 36*, 47-63.
Retrieved from https://openscholarship.wustl.edu/law_journal_law_policy/

Seamone, E. R. (2018). *Rescuing Soldiers of Misfortune: A Full-Spectrum Approach to
Veterans in the Criminal Justice System from Arrest to Reentry.* Springfield, IL:
Charles Thomas.

Seamone, E. R., McGuire, J., Sreenivasan, S., Clark, S., Smee, D., & Dow, D. (2014).
Moving upstream: Why rehabilitative justice in military discharge proceedings
serves a public health interest. *American journal of public health*, *104*(10), 1805-
1811. doi:10.2105/AJPH.2014.302117

Seiter, R. P., & Kadela, K. R. (2003). Prisoner reentry: What works, what does not, and
what is promising. *Crime & Delinquency, 49*(3), 360-388.
doi:10.1177/0011128703049003002

Schaffer, B.& Dick, G. (2009, April). Incarcerated Veterans Outreach & Reentry.
*Society for Social Work Leadership in Health Care.* 44th Annual Conference,
New Orleans. Retrieved from

http://www.ncdsv.org/images/Schaffer_IncarceratedVeteransOutreachAndReentr y_4-22-25-2009.pdf

Shannon, L. M., Birdwhistell, S., Hulbig, S. K., Jones, A. J., Newell, J., & Payne, C. (2017). Examining implementation and preliminary performance indicators of veterans treatment courts: The Kentucky experience. *Evaluation and program planning*, *63*, 54-66. doi:10.1016/j.evalprogplan.2017.03.003

Shein, M. G. (2010). Post-traumatic stress disorder in the criminal justice system: From Vietnam to Iraq and Afghanistan. *Federal Law, 42*-49. Retrieved from http://federalcriminallawcenter.com

Signé, L. (2017). *Policy Implementation–A synthesis of the Study of Policy Implementation and the Causes of Policy Failure* (No. 1703). OCP Policy Center. Retrieved from www.policycenter.ma/.../files/OCPPC-PP1703.pdf

Smith, B. (2013). Depression and motivation. *Phenomenology and the Cognitive Sciences, 12*(4), 615-635. doi:org/10.1007/s11097-012-9264-0

Smith, M. C. (2018). Revisiting implementation theory: An interdisciplinary comparison between urban planning and healthcare implementation research. *Environment and Planning C: Politics and Space, 36*(5), 877-896. doi:10.1177/2399654417725076

Snowden, D.L. (2017). Military service and crime: new evidence. *Social Psychiatry and Psychiatric Epidemiology, 52*(5). 605-615.doi:10.1007/s00127-017-1342-8

Steenkamp, M. M., Schlenger, W. E., Corry, N., Henn-Haase, C., Qian, M., Li, M., ... & Shalev, A. (2017). Predictors of PTSD 40 years after combat: Findings from the

National Vietnam Veterans longitudinal study. *Depression and anxiety*, *34*(8), 711-722. doi:10.1002/da.22628

Taxman, F. S. (2008). To be or not to be: Community supervision déjà vu. *Journal of offender rehabilitation*, *47*(3), 209-219. doi:10.1080/10509670802134036

Taxman, F. S. (2014). Second generation of RNR: The importance of systemic responsivity in expanding core principles of responsivity. *Federal Probation, 78*, 32. Retrieved from http://HeinOnline

Taxman, F. S., & Belenko, S. (2011). Implementing evidence-based practices in community corrections and addiction treatment. Springer Science & Business Media. Retrieved from http://springer

Taxman, F. S., Pattavina, A., & Caudy, M. (2014). Justice reinvestment in the United States: An empirical assessment of the potential impact of increased correctional programming on recidivism. *Victims & Offenders, 9*(1), 50-75. doi:10.1080/15564886.2013.860934

Timko, C., Midboe, A. M., Maisel, N. C., Blodgett, J. C., Asch, S. M., Rosenthal, J., & Blonigen, D. M. (2014). Treatments for recidivism risk among justice-involved veterans. *Journal of Offender Rehabilitation, 53*(8), 620-640. doi:10.1080/10509674.2014.956964

Tsai, J., Finlay, A., Flatley, B., Kasprow, W. J., & Clark, S. (2018). A National Study of Veterans Treatment Court Participants: Who Benefits and Who Recidivates. *Administration and Policy in Mental Health and Mental Health Services Research, 45*(2), 236-244. doi:10.1007/s10488-017-0816-z

Tsai, J., Flatley, B., Kasprow, W. J., Clark, S., & Finlay, A. (2016). Diversion of veterans with criminal justice involvement to treatment courts: participant characteristics and outcomes. *Psychiatric services*, *68*(4), 375-383. doi:10.1176/appi.ps.201600233

Tsai, J., & Goggin, E. (2017). Characteristics, needs, and experiences of US veterans on a specialized prison unit. *Evaluation and program planning, 64*, 44-48. doi:10.1016/j.evalprogplan.2017.05.016

Tsai, J., Rosenheck, R. A., J. Kasprow, W., & McGuire, J. F. (2013). Risk of incarceration and other characteristics of Iraq and Afghanistan era veterans in state and federal prisons. *Psychiatric Services, 64*(1), 36-43. doi:10.1176/appi.ps.201200188

U.S. Department of Veterans Affairs. (2018). *Veterans Justice Programs* (VHA Directive 162.06). Retrieved from https://www.va.gov

Van Dieten, M., & Robinson, D. (2005). Effective correctional treatment: *What is the state of the art.* In annual conference of the International Community Corrections *Association, Atlantic City, NJ.* Retrieved from http://iccalive.org

van Manen, M. (1990). Beyond assumptions: Shifting the limits of action research. *Theory into practice, 29*(3), 152-157. doi:10.1080/00405849009543448

Vander Waal, C. J., Taxman, F. S., & Gurka-Ndanyi, M. A. (2008). Reforming drug treatment services to offenders: Cross-system collaboration, integrated policies, and a seamless continuum of care model. *Journal of Social Work Practice in the Addictions*, *8*(1), 127-153. doi:10.1080/15332560802112086

Veterans Affairs (n.d.) Retrieved from http://www.va.gov

Viglione, J., Rudes, D. S., & Taxman, F. S. (2015). The myriad of challenges with
correctional change: From goals to culture. *European Journal of Probation, 7*(2),
103-123. doi:10.1177/2066220314554151

Voegele, C. (2016). Never Again: Correcting the Administrative Abandonment of
Vietnam Veterans with other than Honorable Discharges Induced by Post-
Traumatic Stress Disorder. *South Carolina Law Review, 68,* 1077. Retrieved from
sclawreview.org

Vietnam Veterans of American (2019). Retrieved from https://vva.org/who-we-
are/history.

Wagner-Pacifici, R., & Schwartz, B. (1991). The Vietnam Veterans Memorial:
commemorating a difficult past. *American journal of Sociology, 97* (2), 376-420.
doi:10.1086/229783

Walden University, Center for Research Quality. (n.d.). Institutional Review Board for
ethical standards in research. Retrieved from
https://academicguides.waldenu.edu/researchcenter/orec/application

Wandersman, A., Duffy, J., Flaspohler, P., Noonan, R., Lubell, K., Stillman, L.,
Blachman, M., Dunville, R., & Saul, J. (2008). Bridging the gap between
prevention research and practice: The Interactive Systems Framework for
dissemination and implementation. *American Journal of Community Psychology,
41,* 171−181. doi:10.1007/s10464-008-9174-z

Welsh, B. C., Farrington, D. P., & Gowar, B. R. (2015). Benefit-cost analysis of crime

prevention programs. *Crime and justice, 44*(1), 447-516. doi:10.1086/681556

Welsh, W. N. (2006). The need for a comprehensive approach to program planning,

development, and evaluation. *Criminology & Public Policy, 5*, 603.

doi:10.1111/j.1745-9133.2006.00395.x

White, M. D., Mulvey, P., Fox, A. M., & Choate, D. (2012). A hero's welcome?

Exploring the  prevalence and problems of military veterans in the arrestee

population. *Justice Quarterly, 29*(2), 258-286.

doi:10.1080/07418825.2011.560890

Yerramsetti, A. P., Simons, D. D., Coonan, L., & Stolar, A. (2017). Veteran treatment

courts: A promising solution. *Behavioral Sciences & The Law, 35*(5-6), 512-522.

doi:10.1002/bsl.2308

Appendix A: Interview Questions Sent to Participants

(Demographics)

A.       What do you call your VSU? _____

B.       hat state is your VSU located in?

C.       How many veterans does your unit currently house?

B. What is the maximum number of veteran inmates your VSU can

accommodate currently?

C. When did your VSU open?

D. If there are any eligibility requirements for inmates in order to be accepted

into the unit, please list them?

E. Are you a veteran?

F. Do you have any veterans working on your unit? If so, what % and in what

capacities?

G. What is your current position?

H. Briefly describe your career path leading up to your current position.

I. Is there a Veterans Treatment Court in the same jurisdiction as your veteran's

unit, or one nearby?

Interview Questions

1.       Describe your purpose for and any situations that motivated or influenced

you to develop a veteran's unit?

2.       How did you know when you were ready to move inmates onto your

veteran's unit from the general population?

3.      Aside from yourself, was anyone else involved in the decision-making process to implement the VSU in your facility?

4.      Describe the process you went through to physically integrate the veteran's unit into your correctional facility?

5.      When you were developing the VSU, did you perceive needing to pitch the idea for support? If yes, was this to individuals from inside the organization, outside the organization, or both, and how did you go about gaining buy-in or support?

6.      Describe the process of staffing the VSU?

7.      Has your VSU staff received any additional training to work with the veteran population? If Yes, please describe.

8.      Tell me about any support /(resources/financial) you received to implement your VSU and its programs?

9.      Describe the VSU implementation process in terms of both who was involved & what the design is based upon.

10.     Describe the process in terms of any planning that was done prior to the VSU implementation.

11.     Describe any assistance you receive now that the VSU has been implemented (resources, organizational, outside agencies, VA, nonprofits, financial, etc.)

12.     Describe any process evaluations you may have in place now that the VSU has been implemented.

13.     Tell me about the support you receive toward sustaining the VSU

14.     Describe changes you have made or plan to make based upon your experiences since implementing the VSU?

**General Questions**

15. Tell me what you are most proud of related to your VSU?

16. What were the most significant challenges you experienced while implementing your VSU?

17. What are the most significant challenges you experience with operating your VSU?

18. What advice would you give to a colleague who wanted to implement their own VSU?

19. Is there anything else you would like to tell me that you feel would help others  to better understand the phenomenon of VSU implementation?

20. Do you consider your VSU to be successful?

Conclusion & Wrap up-

You will be sent your interview transcript to confirm you agree with the accuracy of the content as it was transcribed. You will also receive a summary of the completed study's findings. Thank you again.

Appendix B: Interview Protocol with Coding

| VSU IMPLEMENTATION INTERVIEW PROTOCOL | |
|---|---|
| **Date of Interview:**<br><br>**Location of Interview:**<br><br>**Start Time:**        **End Time:**<br><br>**Name of Interviewee:**<br>*(coded as a number to identify participant based on order interviewed (01-07).*<br><br>**Name of Interviewer:** Lori Riedel<br><br>**Recording Mechanism:** Galaxy S9 android recorder & *Temi©* online transcription app<br><br>**Introduction:**<br>Thank you for taking your time to speak with me today. As you know, this interview will contribute information for a research study intended to better understand the experience of implementing a veterans housing unit within a prison. You have signed an informed consent but as a reminder, you may decline to answer any question you do not wish to answer or withdraw from the interview at any time. This interview will take approximately 1 hour. Do you have any question before we begin? If not, I would like to begin by asking a brief series of demographic background questions about your VSU. | |

| INTERVIEW QUESTIONS (WITH QIF CODING) | INTERVIEWEE RESPONSES<br>Not verbatim, only journal notes on my thoughts during responses |
|---|---|
| A. What do you call your VSU? (use this reference for the remainder of the interview): _____ | |
| B. What state is your VSU located in? | |
| C. How many veterans does your unit currently house? | |
| D. What is the maximum number of veteran inmates your VSU can accommodate currently? | |
| E. When did your VSU open? | |

| | |
|---|---|
| F. Are there any eligibility requirements for inmates in order to be accepted into the unit, please list them? | |
| H. Are you a veteran? (R1/R2) | |
| I. Do you have any veterans working on your unit? If so, what % and in what capacities? | |
| J. What is your current position? (R1/R2) | |
| *Last demographic question* | |
| L. Is there a Veterans Treatment Court in the same jurisdiction as your veteran's unit? or one nearby? | |

**Intro into VSU Experience**
Thank you for providing me with some helpful background information. I now have a better understanding of your unit. Now I would like for you to think back to when you started the veterans' unit. I would like to begin with questions that focuses on the development of your VSU. If at any time you need me to repeat a question, please feel free to do so.

**QIF Phase I (Initial considerations regarding the host setting) (SS, DA & CB)**

| | |
|---|---|
| 1. Describe your purpose for and any situations that motivated or influenced you to develop a veteran's unit? (SS.1) | |
| 2. How did you know when you were ready to move inmates onto your veteran's unit from the general population? (SS. 3) | |
| 3. Aside from yourself, was anyone else involved in the decision-making process to implement the VSU in your facility? (DA.1) | |
| | |

| | |
|---|---|
| 4. Describe the process you went through to physically integrate the veteran's unit into your correctional facility? (SS.2) | |
| 5. When you were developing the VSU, did you perceive needing to pitch the idea for support? If Yes, was this to individuals from inside the organization, outside the organization, or both, and how did you go about gaining buy-in or support? (CB.1) (CB.2) (CB.3) | |
| 6. Describe the process of staffing the VSU? (CB.4) | |
| 7. Has your VSU staff received any additional training to work with the veteran population? If Yes, please describe (CB.5) | |
| 8.Tell me about any support (resources/funding) you received to implement your VSU and its programs? (CB.5) | |
| **QIF Phase II (Creating a structure for implementation) (ST)** | |
| 9. Describe the VSU implementation process in terms of both who was involved & what the design is based upon (ST.1) | |
| 10. Describe the process in terms of any planning that was done prior to the VSU implementation (ST.2) | |
| **QIF Phase III (Ongoing structure once implementation began) (OS)** | |
| 11. Describe any assistance you receive now that the VSU has been implemented (OS.1) *(resources,* | |

| | |
|---|---|
| *organizational, outside agencies, VA, nonprofits, financial, etc.)* | |
| 12. Describe any process evaluations you may have in place now that the VSU has been implemented (OS.2) (OS.3) | |
| 13. Tell me about the support you receive toward sustaining the VSU? (OS.3) | |
| **QIF Phase IV (Improving future application) (FI)** | |
| *The last questions are general question about your VSU* <br> **General Open-Ended Questions (GQ)** | |
| 14. Describe changes you have made or plan to make based upon your experiences since implementing the VSU? (FI.1) | |
| 15. Tell me what you are most proud of related to your VSU? (GQ1) | |
| 16. What were the most significant challenges you experienced while implementing/and then operating your VSU? (GQ.2) | |
| 17. What advice would you give to a colleague who wanted to implement their own VSU? (GQ.3) | |
| 18. Is there anything else you would like to tell me that you feel would help others to better understand the implementation of a VSU? (GQ.4) | |
| 19. Do you consider your VSU to be successful? How? (GQ. 5) | |
| 20. <br> *Conclusion-Thank you! to wrap things up I would like to ask a couple of concluding questions. The first one is…* | |

| | |
|---|---|
| **Research Question 2 (R2)**<br>Were there any situations that influenced or affected your experience while implementing the unit that has not been covered so far? | |
| **Research Question 1 (R1)**<br>Is there anything else that you would like to share, in terms of your experience with implementing the unit? | |

*-Okay, thank you, this concludes the formal interview. Do you have any questions or comments? You can get hold of me at any time; do you have my contact info?*

*-Also, I will be sending you your own copy of the interview transcript to ensure you agree with the content as it was transcribed. Once you ok the transcript, I will some of your comments as data in the study, and let you know when the study has been completed. -Thank you again.*

Appendix C: Email to VSU Implementers (Participants)

Date:
Institution Name:
Address:

Dear: (Correctional Administrator)

My name is Lori Riedel and I am a doctoral student at Walden University. I am writing to ask for your assistance with my study. My research study focuses on gaining insight from those with first-hand knowledge of implementing a separate unit for veteran inmates (VSU) within their prison. Based on previous contact with your facility, you have been identified as one of the primary individuals responsible for the implementation of the VSU currently housed within your prison at Sumter Correctional Institution.

I will be conducting telephone interviews between the months of August and September of this year (2019) with correctional administrators who have implemented the VSU model. I would very much like for you to consider participating in the study which would require participating in a telephone interview, lasting approximately 60 minutes.

If you agree to voluntarily participate, you will be contacted by phone at a time that is convenient for you to answer approximately 20 questions regarding your experience with implementing your VSU. Additionally, you will receive the exact interview questions that you will be asked at least one week in advance of the scheduled interview, and you have the option to remain completely anonymous or share your identity and the location of your facility.

Once the interview statements have been transcribed, you will be sent a copy of your transcript to review for the purpose of ensuring that your interview was transcribed accurately. It is estimated that your review of the transcript will take approximately 15 minutes. I will contact you via email to inform you when the study has been completed, and I will provide you with a summary of the research study findings and conclusions.

After reading the informed consent document that has been sent as an attachment to this email, if you would like to participate in the study, please indicate this by replying to this email with the words 'I Consent."

Please also include in the reply email which confirms your consent the phone number that is best to reach you, along with your first and second choices for the best day(s) and time(s) you would prefer to complete the interview. I will then send you a follow up email confirming the interview day and time. If you would not like to participate in the study, please disregard this email, thank you.


Thank you for your consideration.
Lori Riedel

Appendix D: Qualitative Journal Excerpts

1.Re-reading through my interview transcript today I am now more aware of the importance of following up to get try to get a response to each precoded question when the interview gets sidetracked.

2.When speaking with (interviewee) today I observed that when I agree on a topic with the participant, I tend to get more animated, and can get sidetracked. I have written myself a note to place next to my screen to stay on the script and make notes on ideas I want to go back and expand on after completing the protocol.

3.Today I became aware of an internal bias flaring up when speaking to (interviewee). I felt that they were glossing over the concurrent mental health and substance abuse needs specific to veteran offenders, and that previous interviewees focused on more. I notice this happened when I perceived their focus was solely on the importance of an inmate having a job upon release is utmost. As I noticed this thought, I jotted it down and returned to listening to the

4.Another bias that came up today occurred when I had the realization that I tend to encourage more interview content from interviewees that I perceive understand an academic approach to program evaluation has value. When I perceive an interview may not value evidence-based practices I am not as thoughtful with my interview technique. When I became aware, I re-doubled my efforts to listen for value in this interviewee's responses.