AMERICAN BAR ASSOCIATION
COMMISSION ON HOMELESSNESS AND POVERTY
CRIMINAL JUSTICE SECTION
NATIONAL CONFERENCE OF SPECIALIZED COURT JUDGES
STANDING COMMITTEE ON ARMED FORCES LAW
COMMISSION ON MENTAL AND PHYSICAL DISABILITY LAW
STANDING COMMITTEE ON SUBSTANCE ABUSE
JUDICIAL DIVISION
TORT TRIAL AND INSURANCE PRACTICE SECTION
STANDING COMMITTEE ON LEGAL AID AND INDIGENT DEFENDANTS
NATIONAL CONFERENCE OF ADMINISTRATIVE LAW JUDICIARY
STANDING COMMITTEE ON THE DELIVERY OF LEGAL SERVICES

RECOMMENDATION

RESOLVED, That the American Bar Association supports the development of comprehensive, systemic approaches to address the special needs of veterans within civil and criminal court contexts, including but not limited to proceedings involving veterans service-related injuries, disorders, mental health and substance abuse needs, through programs that connect veterans to appropriate housing, treatment and services through partnerships with the local Veterans Affairs Medical Centers, community-based services and housing providers.

FURTHER RESOLVED, That the American Bar Association urges state, local, and territorial courts to facilitate the development of Veterans Treatment Courts, including but not limited to specialized court calendars or the expansion of available resources within existing civil and criminal court models focused on treatment-oriented proceedings.

FURTHER RESOLVED, That the American Bar Association adopts the following principles for Veterans Treatment Courts to the extent appropriate and feasible for each jurisdiction:

1) Participation is voluntary and the constitutional rights of participants are retained.

2) Veterans Treatment Courts or the resources devoted to veterans within existing civil and criminal court models will utilize the participation of a caseworker and legal representative with coordination from federal Veterans Affairs employees, veteran service agencies, community-based service providers, and local agencies to assess the needs of and provide veterans with appropriate housing, treatment, services, job training, and benefits.
3) Veterans Treatment Courts or the resources devoted to veterans within existing civil and criminal court models include mentoring sessions with other veterans.

4) In the criminal court context, participants in the program have all qualifying charges reduced or dismissed, or traditional sanctions waived, including where appropriate and feasible, more serious charges, commensurate with completion of appropriate treatment and services. Where charges are dismissed, public access to the record is limited, where appropriate and feasible as provided by state or local law, including through expungement.

5) The Veterans Treatment Courts shall address those criminal matters that involve serious violent felonies only at the discretion of local courts.

6) The success of Veterans Treatment Courts or additional resources devoted to veterans within existing civil and criminal court models is measured through the following outcomes:
   a) prevention and reduction of homelessness among veterans;
   b) reduction of recidivism;
   c) recovery achieved through compliance with the individual treatment plan of the veteran;
   d) improved communication and reunification with family members, when appropriate;
   e) successful elimination of legal barriers to self-sufficiency;
   f) reentry to the workforce, enhanced job opportunities, and reintegration with the community;
   g) economic savings to the courts, criminal justice and public health systems, and the community;
   h) connection to VA benefits, long term supportive housing, and other benefits for participants whose service related disabilities are so severe as to prevent their return to the workforce.
REPORT

Introduction

In February 2003, the ABA House of Delegates adopted a policy urging state, local and territorial courts to adopt Homeless Court Programs as treatment-oriented diversionary proceedings as a means to foster the movement of people experiencing homelessness from the streets through a shelter program to self-sufficiency (see Report No. 116). This policy (plus a subsequent policy approved in August 2006) and the vigorous work of the ABA Commission on Homelessness & Poverty providing technical support to jurisdictions across the country in building Homeless Courts has helped dramatically expand the number of such court programs. Since then, Veterans Courts have emerged as a particularly important and distinctive outgrowth of the therapeutic justice model upon which Homeless Court programs are founded.

Veterans Courts offer structured intervention, treatment and integrated services for veterans in the criminal justice system who struggle with the effects of trauma from their service and suffer from Post Traumatic Stress Disorder (PTSD), traumatic brain injury (TBI), mental illness and/or addictions. Veterans Courts are based on successful therapeutic and collaborative justice models such as drug and mental health courts, which feature a court-based regimen of assessments, treatment, review hearings, and graduated sanctions (when appropriate) with the avoidance of incarceration. Creating a veteran-specific treatment court is based, in part, on the opinion of psychiatrists and law enforcement officials that the traumas of combat result in PTSD that can lead to addiction and erratic behavior that result in criminal charges. Recognizing the important role such courts can play in preventing veterans from ending up incarcerated and facilitating their connection with community-based treatment alternatives, the U.S. Department of Veterans Affairs recently authorized 153 social workers to be part of a “Veterans Justice Outreach” initiative (“VJO”) to work with each of the V.A. Medical Centers throughout the country and act as a resource to enable the judicial system to divert veterans to V.A. residential recovery programs and therapeutic services.

With vast numbers of veterans returning from the wars in Iraq and Afghanistan manifesting PTSD and brain trauma at unprecedented levels—and readily available V.A. funded treatment and services, there has never been a more critical need for supporting the efforts of our judiciary in preventing these brave men and women who have put their lives on the line in service of our country from becoming homeless. Some of the unique aspects of the Veterans Court models within the criminal context, such as the provision of support services including case management, legal representation, and coordination with the U.S. Department of Veterans Affairs should be applied to civil court frameworks. Basic life necessities, such as the maintenance of rental housing, foreclosure prevention, maintenance of employment and public benefits are all critical to prevent homelessness among our veterans. The provision of intensive services to veterans within existing civil courts, such as housing or eviction courts and other civil dockets will aid in ensuring an end to veteran homelessness.

In light of the interest in promoting Veterans Courts nationally and the unprecedented opportunity to link these courts with V.A. social worker resources that will invigorate their effectiveness, we have developed proposed policy recommendations to provide jurisdictions
guidance in promoting best practices, achieving common goals of such programs, and allow flexibility for jurisdictions to innovate based on their unique challenges.

The development and implementation of Veterans Court Programs varies in form and practice. While all share common goals and principles, some strive to make do with limited resources. The Veterans Court principles in the proposed recommendation strives to link all these programs, promote awareness of the emerging VJO resources, and set forth guiding principles and basic tenets to clarify any confusion of implementation and practice.

Context

Veterans make up about 10% of the U.S. adult general population, but perhaps as much as one-third of the adult homeless population. Veterans are twice as likely as the general population to become chronically homeless. Moreover, the National Alliance to End Homelessness estimates anywhere from 90,000 to a half a million additional veterans are at risk for homelessness. See National Coalition for Homeless Veterans – Homeless Veterans Fact Sheet. Moreover, a 2002 U.S. Department of Justice report indicated that:

- veterans comprise 9.3% of all persons incarcerated;
- 70% are in jail for non-violent offenses;
- 82% of veterans in jail are eligible for V.A. services;
  - 65% honorably discharged
  - 17% general discharge with honorable conditions
  - 18% of jailed veterans were homeless

These troublesome figures are expected to rise as the 1.7 million troops deployed to Iraq and Afghanistan return and begin to seek services. Indeed, many of those Iraq and Afghanistan veterans will suffer from multiple physical and psychological wounds resulting from their service.

Psychiatric issues and substance abuse are widely regarded as the primary risk factors for homelessness and incarceration among veterans. Indeed, the VA estimates that 45% of homeless veterans suffer from mental illness, and slightly more than 70% suffer from alcohol or other drug abuse problems. The Rand Corporation has found that one-third of Iraq and Afghanistan veterans suffer from PTSD, Traumatic Brain Injury (TBI), or major depression, attributed to long deployments and a high rate of exposure to combat.

In spite of the increase in media attention, communities by and large remain under-educated and misinformed about PTSD and TBI, their causes, symptoms, and how to help those suffering from these medical conditions. A basic understanding of PTSD and TBI is essential in order for the criminal justice system to respond to the behaviors and challenges triggered by these medical conditions.

The DSM-IV2 describes PTSD, in pertinent part, as “the development of characteristic symptoms following exposure to an extreme traumatic stressor involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to
one’s physical integrity; or witnessing an event that involves death, injury, or a threat to the physical integrity of another person....” In the simplest terms, PTSD is the brain’s inability to let go of difficult or painful past experiences.

For veterans, PTSD typically manifests itself by forcing the individual to repeatedly relive traumatic combat situations, or to remain in a hyper-vigilant, ready-for-battle state of mind. Their military training and skills, once necessary and honorable when in the service of our country overseas, are troubling upon their return stateside. These behaviors combined with the uncertainty of deployment, repeated and extended tours of duty, and the constant peril of facing an unknown enemy start to explain the difficulties veterans face when the uniform comes off and the normal rigors of civilian life resume.

The trauma from TBI is most pronounced in Iraq and Afghanistan veterans who have survived roadside bomb blasts and the successive shock waves. These explosions literally rattle the service member’s brain. Common symptoms of TBI include difficulty remembering, concentrating or making decisions; slowness in thinking, speaking, acting or reading; getting lost or easily confused; feeling tired all the time, having no energy or motivation; mood changes (feeling sad or angry for no reason); headaches or neck pain that do not go away; blurred vision; light-headedness, dizziness or loss of balance; nausea; changes in sleep patterns; loss of sense of smell or taste; and ringing in the ears.3 Veterans suffering from PTSD and TBI return from their military tours changed, sometimes temporarily, other times permanently. Sadly, many veterans prefer the diagnosis of TBI over PTSD due to the social stigma and discrimination that can accompany a diagnosis of PTSD, especially in the military milieu.

The Rand Corporation reports, as of 2008, 31% of the 1.8 million Americans who have served in Iraq and Afghanistan have a service-related mental health condition or a Traumatic Brain Injury (TBI).1 U.S. Army, itself, recently concluded that the likelihood of combat-induced psychological trauma increases with each deployment.2 The RAND study found a continuing stigma surrounding mental health issues that prevented more than half of psychologically-injured veterans from reporting their problems or seeking help.

Like anyone, veterans are at a higher risk of homelessness or criminalization when faced with mental illness, physical disabilities, weak social structures, and poverty. Veterans, however, seem to experience several of those risk factors at a higher rate than the general public. Some of those issues, like physical disabilities or psychological problems, may have resulted directly from the veteran’s military service. Others, like weak social networks and poverty, could have existed before enlistment, or could have been created or compounded by military service and a difficult transition back to civilian life.

The time has never been more critical to provide a safety net for veterans who have put themselves in harm’s way to protect our liberty in avoiding the predictable poor outcomes that these risk factors pose and we need to develop innovative strategies to help their transition back

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2 Mental Health Advisory Team (MHAT) V, Operation Iraqi Freedom 06-08: Iraq; Operation Enduring Freedom 8: Afghanistan; 14 February 2008, United States Army Medical Command.
to the community to be successful. Veterans Court Programs have emerged as having singular success in helping the most vulnerable veterans achieve these goals.

Veterans Court and Beyond

As indicated, veterans returning from the wars are manifesting unprecedented levels of PTSD and traumatic brain injury, creating behaviors that, if left untreated, can cause loss of home, employment, and trigger involvement with the criminal justice system. Jail, however, merely exacerbates their underlying trauma as prison systems are ill-equipped to provide drug and mental health treatment. In addition, studies show that veterans typically treat their trauma with alcohol or drug abuse. These addictions further exacerbate their predicament.

Within the criminal court context, the therapeutic justice and collaborative court model upon which Veterans Courts are based has emerged as having unique force and effect to break this cycle to homelessness by extricating veterans from jail and diverting them to appropriate community or V.A. based treatment alternatives where their underlying mental disabilities and trauma are addressed with intensive treatment and peer support.

The Veterans Court Program within the criminal court model is a collaboration of all the traditional criminal justice practitioners enriched with a team of community based treatment providers who work together to devise the best plan for recovery and positive outcomes for each participant. This team-based decision making model strives to holistically provide the full continuum of services necessary to help the veteran achieve full recovery and normalcy and eliminate the risk of recidivism. The team must agree on the parameters of which cases will be heard and how they will be resolved. The overriding goal of the Veterans Court Program is to provide the participants a fresh start and help remove obstacles that would interfere with this. This fresh start reconciles each participant’s successful completion of program activities against their outstanding cases.

The Veterans Court Program removes major obstacles posed by potential criminal convictions and their consequences that can otherwise confound the individual’s efforts to reclaim normalcy and return to their families and communities as healthful contributing members. Concomitantly, by facilitating recovery and wellness, these courts provide the community with greater assurance public safety and order will be better served and recidivism is not as likely to recur.

To counteract the effect of criminal cases that push veterans further outside society, this court combines a progressive plea bargain system, an alternative sentencing structure, and proof of community-based shelter program activities to address a range of offenses (as determined by each jurisdiction). These courts expand access to justice, reduce court costs, and help veterans reintegrate into society and lead productive lives upon successful completion of treatment.

Different versions of Veterans Courts are emerging – some utilizing a “veterans’ docket” as part of a regular criminal court, others integrating Veterans Court docket into a full blown Community Court, in which the court is set up in a community services center and connects participants with the array of social services, mental health and substance abuse treatment, employment supports, and other counseling services that share space right down the hall. Judge
Wendy Lindley, who runs the Santa Ana Veterans Court, was the architect of such a full service Community Court, which holds her Veterans Court session there every Tuesday, and our Commission commends her model as embodying both best practices and an optimal environment conducive to full recovery.

All models apply principles of therapeutic, collaborative and restorative justice in which community based treatment options are exhausted as the most likely vehicle to achieve the goals of true rehabilitation, recovery and reintegration to the community.

It should be noted that Veterans Courts are successfully partnering with appropriate agencies and providers to address civil legal issues as well. The rising numbers of veterans facing homelessness as a result of loss of employment, benefits, and housing, require the application of the services continuum provided within the criminal context of Veterans Court Program to civil courts. The provision of case management, legal representation, collaboration with U.S. Department of Veterans Affairs and other agencies, are critical tools to aid veterans in obtaining and maintaining housing. In particular, linkages that can be made for veterans to the Veterans Affairs Supportive Housing Program (VASH), operated in collaboration with the U.S. Department of Housing and Urban Development and the U.S. Department of Veterans Affairs, which provides affordable housing with supportive services is a critical resource in eliminating veteran homelessness. The utilization of the services within housing or eviction courts, family courts, and other courts within civil dockets can be critical in preventing eviction and providing supports to aid veterans with severe mental and physical disabilities.

**Recommendations**

The proposed recommendation supports the development of comprehensive, systemic approaches to address the special needs of veterans through diversionary programs that connect them to appropriate housing, treatment and services through partnerships with the local Veterans Administration Medical Centers, community-based services and housing providers. The recommendation sets forth key principles for Veterans Court Programs, recognizing that administration of the programs will differ depending on the particular needs, goals and challenges of a jurisdiction. Each jurisdiction varies in the level of court and V.A. or other community-based services available to implement a viable Veterans Court Program. Some jurisdictions utilize district attorney’s to prosecute cases while others depend on city attorneys. Some utilize public defenders while others depend on contract or private attorneys. The social service and mental health agencies in any given community vary in quality and accessibility across the country. By bringing attention to the opportunity to utilize the VJO social workers the V.A. is making available to courts nationally and providing technical support based upon these model Policy recommendations, the ABA can play an instrumental role in helping shape viable Veterans Courts throughout the country.

We emphasize that the recommendation highlights best practices from existing Veterans Courts and does not seek to impart mandates that would stifle innovation. The intent of the recommendation is to promote a framework within which courts have the flexibility to develop constructive models that work best for them locally to achieve positive outcomes.
The majority of cases handled by existing Veterans Courts predictably fall within the scope of public disturbance offenses, public intoxication or drug possession – charges that reflect the individual’s unstable mental health condition and PTSD. There is controversy regarding whether Veterans Courts (or any treatment courts) should handle felony cases involving physical harm to others. Veterans Courts in San Jose, CA and Orange County, CA have taken these types of cases and are showing early success. The drafters of the policy recommendation intentionally did not specify the types of offenses that should or should not be included in Veterans Courts based on the belief that each jurisdiction should have autonomy in determining the range and gravity of offenses they wish to deem eligible for the program.

**Key Principles:**

*Participation is voluntary and the constitutional rights of participants are retained.*

The Veterans Court Program does not require defendants to waive any protections afforded by due process of law. Legal counsel must be available to meet with veterans in advance of the hearing to review his/her case(s) and options. During the counseling session, legal counsel explains the Veteran Court Program or the resource available to the veteran, the process and benefits of its assistance, and its voluntary nature, but also assures each veteran of his/her due process rights to challenge their case, whether pursuing a motion or trial by jury.

Prosecutors and defense counsel, working with the court, agree on which offenses, in general, may be disposed of in the Veteran Court Program, recognizing that defendant participation shall be voluntary. The participants typically are referred to the Veterans Court Program by defense attorneys, prosecutors or other judges once they perceive that the veteran has served in combat and manifests symptoms of PTSD. Some jurisdictions, such as California, have enacted statutes making it incumbent upon courts to consider alternative sentencing and community based treatment options for veterans with such a profile. See California Penal Code Section 1170.9.

In a number of major cities, V.A. Social Workers also conduct outreach to jails to facilitate connection with Veterans Courts.

Unlike a traditional court, the judge communicates more often with the veteran participant than with the defense attorney or prosecutor. The model Veterans Court operates upon team decision making that is centered on doing whatever it takes to help the participant achieve recovery, wellness, and healthful return to his/her family by utilizing appropriate treatment and services.

The judge asks the defendant about what brought him/her to the court, his/her participation in programs, counseling, or classes. The judge consults the team about the recommended regimen the veteran should accept that is most likely to result in his/her full recovery and healthful transition back to the community. The goal is to dismiss the charges, warrants, and penalties upon successful completion of the treatment plan to ensure that the defendant’s record is clean and will not therefore hinder his/her efforts to secure employment.

_Veterans Courts coordinate with federal Veterans Administration employees, veteran service agencies, community-based service providers, and local agencies_
to assess the needs of and provide veterans with appropriate housing, treatment, services, job training, and benefits.

The court works with the V.A. and other community-based service providers to establish criteria for individual participation and receipt of services, and individuals are screened pursuant to these criteria. Each service agency performs assessments to determine the individual’s social history and needs, their abilities and motivation. Working together, the service agency representatives and the veteran build a relationship of trust, mutual respect and common commitment to positive outcomes, which if achieved typically result in the criminal charges being dismissed or reduced.

The court recognizes that each provider has its own requirements and guidelines to promote the participant’s recovery. Some may require a resident to complete an assessment, an initial phase of the program or attend specified meetings. These agencies report the veteran’s progress to the court.

When participants work willingly with agency representatives to identify and overcome the causes of their behavioral problems, they are in a stronger position to successfully comply with court orders. The quality, not the quantity, of the participant’s time spent in furtherance of the program is of paramount importance for a successful experience. Thus the court encourages each participant to participate in a program that will best meet his/her needs.

Veterans Courts include mentoring sessions with other veterans.

Existing Veterans Courts use “peer mentoring” to facilitate recovery and completion with the court program. Thus veterans who have succeeded in graduating from their Veterans Court Program will be asked to mentor incoming participants. This helps create an environment and support system most likely to ensure that the participant will engage with the court program willingly and with a positive frame of mind.

Participants have all qualifying charges reduced or dismissed, including where appropriate and feasible, more serious charges, commensurate with completion of appropriate treatment and services. Where charges are dismissed, public access to the record is limited, where appropriate and feasible as provided by state or local law, including through expungement.

The range and gravity of offenses that Veterans Courts across the country have been willing to consider vary dramatically. While all such courts we have studied adjudicate misdemeanor offenses that typically do not include a victim, some jurisdictions have also taken felony cases that do involve a victim and these courts feel strongly that this court model works extremely well for such cases because it provides effective treatment in a peer environment to veterans who lash out while suffering from PTSD or TBI and facilitates recovery and also restitution to the victim (or 'restorative justice' principles). Other jurisdictions do not take on felonies involving victims for various reasons including political ones or because of a lack of resources to structure meaningful alternative sentencing with appropriate intensive supports. California's statute - which their Veterans Courts have been built to enforce - leaves it to the court's discretion - and
that is how our Commission feels this issue should be handled - jurisdiction by jurisdiction, case by case, as resources and local wisdom best dictate.

Utilizing the problem solving approach typical of other courts that apply therapeutic justice principles such as mental health and drug courts, most veterans courts reduce or dismiss or expunge lower level victimless offenses upon full completion of the program the veteran was required to complete - which often requires a greater personal sacrifice and more work and extends well beyond any jail time they may have been facing. The court feels that justice has been served at this point and the veteran deserves a fresh crack at rejoining the workforce and society without any lingering stigma of the offense. Some courts will even clear felonies in the interest of justice - while others are not allowed to by statute or by political or other constraints. The Commission again felt that this is an area where courts are encouraged to consider best practices but ultimately decide locally what the viable parameters should be.

**Veterans Courts should Track Outcomes: The success of Veterans Courts is measured by outcomes.**

After studying the Veterans Courts programs in different parts of the country, the Commission concluded that they are alike in measuring their success through the following outcomes:

a) prevention and reduction of homelessness among veterans;
b) reduction of recidivism;
c) recovery achieved through compliance with the individual treatment plan of the veteran;
d) improved communication and reunification with family members, when appropriate;
e) successful elimination of legal barriers to self-sufficiency;
f) reentry to the workforce, enhanced job opportunities, and reintegration with the community;
g) economic savings to the courts, criminal justice and public health systems, and the community;
h) connection to VA benefits, long term supportive housing, and other benefits for participants whose service related disabilities are so severe as to prevent their return to the workforce.

Tracking and achieving these outcomes helps demonstrate both the efficacy of this model and the long term cost savings associated with enabling individuals to achieve recovery and return to the workforce as opposed to ending up cycling in and out of jail and on and off the streets with untreated disorders and maladies at enormous cost to taxpayers. For example, Judge Stephen Manley who oversees the Veterans Court in San Jose, CA recently released a report detailing how his application of the therapeutic and restorative justice principles resulted in more than $7 million in savings to the state of California by reducing time spent in jail and emergency services otherwise caused by relapse and recidivism.

The outcome measurements listed above also reinforce the core mission of Veteran Court Programs, which is to end veteran homelessness and aid the veteran in accomplishing his or her
road to recovery and self-sufficiency, as well as long term societal benefits that such recovery yields.

ABA Policy

The ABA has a history of supporting initiatives and legislation concerning vulnerable individuals and access to justice, including policy in support of an increase in the availability of affordable transitional and permanent housing (housing and community economic development, 1999 Annual Meeting; affordability and availability of housing, 1995 Annual Meeting; and funding for public housing, 1992 Annual Meeting), as well as policy in support of access to justice and legal aid for indigent people (legal representation for indigent defendants, 1998 Annual Meeting; access to justice, 1995 Midyear Meeting; free legal representation to those at risk of becoming homeless, 1994 Annual Meeting; indigent defense services, 1991 Midyear Meeting; equal access to justice, 1990 Annual Meeting).

The ABA has also adopted policy resolutions in support of specialized treatment courts – including policy in support of homeless courts, drug courts, and unified children and family courts.3 The proposed recommendation enhances the Association’s existing policy by establishing key principles and due process protections for Veterans Courts.

Conclusion

The Veterans Court Program is an innovative and effective means for veterans afflicted with PTSD and TBI and/or addiction to obtain and treatment and services they need to secure and maintain housing, resolve outstanding criminal offenses, and stabilize their lives. This model is showing great promise as a crucial vehicle to help our servicemen and women transition back to their communities and families in a healthful and productive manner.

The American Bar Association has a long history of promoting access to justice through policy based advocacy on behalf of veterans; homeless and/or impoverished people; through urging for increased funding for legal services organizations; through educating members of the bar as to the plight of homeless and impoverished people and encouraging the legal community to make a commitment to providing pro bono legal services; and through supporting innovative court programs designed to address the underlying problems that are the root cause of criminal conduct, such as homeless court programs and drug courts. Support of the proposed policy resolution will supplement the Association’s current policy on treatment courts and reaffirm its commitment to fostering the replication of innovative court programs across the country.

Respectfully submitted,
Josephine McNeil, Chair
Commission on Homelessness & Poverty
February 2010

3 The ABA has adopted policy resolutions in support of specialized drug courts (1994 Midyear Meeting), unified children and family courts (1994 Annual Meeting), and homeless courts (2003 Midyear Meeting; 2006 Annual Meeting).