

# FLORIDA POLICY PROJECT

BEST PRACTICES, BETTER OUTCOMES

**Improving Veterans' Incarceration  
and Reentry in Florida:  
Leaving No Veteran Behind**

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**[FloridaPolicyProject.com](https://FloridaPolicyProject.com)**

# Improving Veterans' Incarceration and Reentry in Florida:

Leaving No Veteran Behind

Efforts have been made to limit veterans' exposure to incarceration. While these efforts may be diverting some veterans from prison, many veterans are still incarcerated in Florida and will eventually return to their communities. Understanding how to improve their incarceration experience and lower barriers to reentry will ensure that Florida's veterans have access to the services they earned and return to their communities better than when they left them.

This report describes the problems Florida's incarcerated veterans face and offers examples of programs that could be implemented to help reduce recidivism and improve reentry.

## Recommendations include:

- Deploy system-wide use of the Veteran Re-entry Search Service to ensure veterans are identified and connected with veteran specific services.
- Publish veteran statistics in the FDOC Annual Report and Recidivism Report detailing demographic information of incarcerated veterans similar to what FDOC does for elderly inmates.
- Expand the use of veteran's only housing units.
- Fund the expansion of trauma-informed mental health care, especially among incarcerated veterans who present symptoms of Post-traumatic stress disorder (PTSD) and Traumatic brain injury (TBI).
- Appropriate funds for the development of a reentry roadmap for veterans incarcerated in Florida.
- Fund a pilot program that uses home confinement for veterans who meet certain eligibility criteria such as age, time-served in current sentence, and offense seriousness.

## Best Practices

The following areas should be addressed to obtain best outcomes:

- Identification and Data Publication
- Veterans Housing Units
- Trauma-Informed Mental Health Care
- Veteran Transitional Services

# Improving Veterans' Incarceration and Reentry in Florida:

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Justice involved veterans have garnered increased attention in recent years. Several practices have been deployed to help divert veterans from incarceration. The Department of Veterans' Affairs (VA) Veterans Justice Outreach (VJO) program and the increased use of Veterans' Treatment Courts have helped respond to the needs of justice-involved veterans while maintaining accountability for criminal activity. Despite these efforts, many veterans find themselves incarcerated in prisons around the country. Although national estimates suggest that over 96,000 veterans are incarcerated in state prisons in the United States (accounting for about 8% of all people incarcerated in state prisons) many states underestimate their incarcerated veteran population.<sup>1</sup> For example, based on data from inmate self-identification, California estimated their incarcerated veteran population to be approximately 2.7% of inmates. After accessing VA data, they found that 7.7% of their incarcerated population qualified as veterans—making them eligible for numerous federal benefits.<sup>2</sup>

According to data from the Florida Department of Corrections, as of October 2023, 3,989 people in Florida prisons self-identified as veterans. Over 99% of the 3,989 people are men (only 30 women in Florida prisons self-identified as veterans). Accounting for approximately 5% of all people incarcerated in Florida prisons, as noted above, this proportion likely underestimates the true number of people incarcerated in Florida facilities who would qualify under federal statute as a veteran. Difficulty in identifying veterans is exacerbated by the fact that Florida Statute and the United States Code differ in their definition of who qualifies as a veteran.

Florida Statute 1.01(14) defines a “veteran” as “...a person who served in the active military, naval, or air service and who was discharged or released under honorable conditions only or who later received an upgraded discharge under honorable conditions...” Federal Statute 38 U.S.C. § 101(2) defines a veteran as “...a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable...” Despite the differences in definition and the likely underreporting of veteran status in Florida prisons, we do know some things about people incarcerated in Florida who self-identify as veterans as well as issues faced by incarcerated veterans generally.

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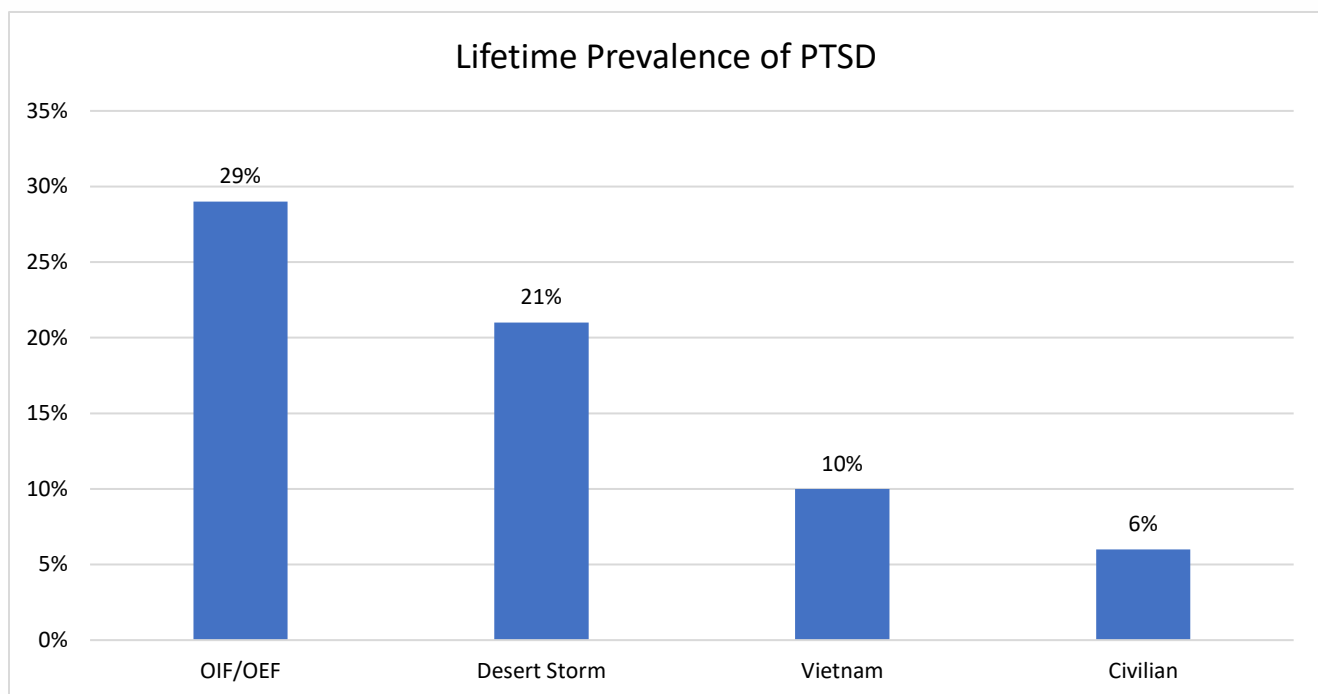
<sup>1</sup> Maruschak, L., Bronson, J., & Alper, M. 2021. *Survey of Prison Inmates, 2016: Veterans in Prison*. U.S. Department of Justice. Office of Justice Programs. Bureau of Justice Statistics.

<sup>2</sup> Pelletier, D. 2022. *Identifying the Veteran Population within the Criminal Justice System*. Dispatch from the Front Lines. Justice for Vets. Justiceforvets.org

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Discussions of veterans' incarceration must consider the mental health challenges faced by people with military experience, especially combat veterans. According to the VA, combat veterans are three times as likely to experience posttraumatic stress disorder (PTSD). Among different eras of combat veterans, 29% of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) veterans report a lifetime prevalence of PTSD—higher than the lifetime prevalence of PTSD reported by veterans of Desert Storm (21%), and Vietnam (10%).<sup>3</sup> Those most likely to experience PTSD often face other life factors that increase their likelihood of justice-involvement such as alcohol or substance abuse, risky behavior, fewer years of education, and lower self-control.<sup>4</sup>



Data source: U.S. Department of Veterans' Affairs, [https://www.ptsd.va.gov/understand/common/common\\_veterans.asp](https://www.ptsd.va.gov/understand/common/common_veterans.asp)

<sup>3</sup> [https://www.ptsd.va.gov/understand/common/common\\_veterans.asp](https://www.ptsd.va.gov/understand/common/common_veterans.asp)

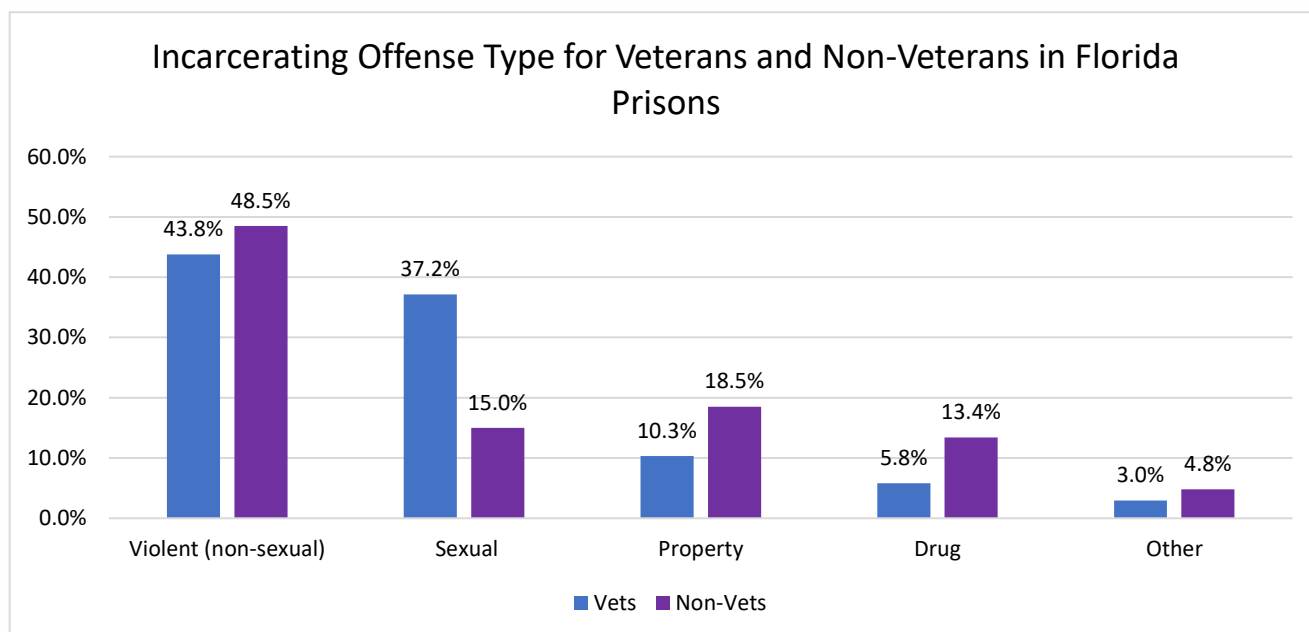
<sup>4</sup> Traumatic Brain Injury Center of Excellence. Research Review on Mild Traumatic Brain Injury and Posttraumatic Stress Disorder. Military Health System and Defense Health Agency. <https://health.mil/Military-Health-Topics/Centers-of-Excellence/Traumatic-Brain-Injury-Center-of-Excellence>

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At the same time, prevalence estimates find that between 5-35% of OIF/OEF veterans experienced mild traumatic brain injuries (mTBI). Suffering from mTBI doubles the chance of experiencing another TBI and is frequently accompanied by somatic, cognitive, and emotional symptoms. Based on these factors it is unsurprising that PTSD is among the most commonly diagnosed disorders associated with mTBI. The comorbidity of PTSD with mTBI is 36.8% among veterans compared to 15.7% among civilians. PTSD and mTBI may be present in the non-veteran prison population so correctional agencies should be responsive to it, generally, but given the prevalence of both PTSD and TBI in the veterans' population, agencies must be prepared to identify and address this critical veteran-specific criminogenic need. Importantly, PTSD and TBI, separately and in combination, have been linked to violence especially when compounded with substance abuse.<sup>5</sup> Additionally, mental health, TBI, and other trauma including military sexual trauma (MST) have been linked with sexual offending.<sup>6</sup>

Veterans in Florida, like veterans across the U.S., are disproportionately incarcerated for sexual offenses. While 26.4% of veterans are incarcerated for violent sexual offenses across state prisons in the U.S.,<sup>7</sup> 37.2% of veterans incarcerated in Florida are in prison for a sexual offense. Compared to non-veterans incarcerated in state prisons across the U.S. (11.7%) and non-veterans incarcerated in FL (15%), Veterans are more than twice as likely to be incarcerated for a sexual offense than non-veterans.



<sup>5</sup> Traumatic Brain Injury Center of Excellence. Research Review on Mild Traumatic Brain Injury and Posttraumatic Stress Disorder. Military Health System and Defense Health Agency. <https://health.mil/Military-Health-Topics/Centers-of-Excellence/Traumatic-Brain-Injury-Center-of-Excellence>. Blonigen, D., Bui, L., Elbogen, E., Blodgett, J., Maisel, N., Midboe, A., Asch, S., McGuire, J., & Timko, C. 2016. Risk of recidivism among justice-involved veterans: A systematic review of the literature. *Criminal Justice Policy Review*, 27, 812-837.

<sup>6</sup> Finlay, A., McGuire, J., Bronson, J., & Sreenivasan, S. 2019. Veterans in prison for sexual offenses: characteristics and reentry service needs. *Sexual Abuse*, 31, 560-579. DelBello, M., Soutullo, C., Zimmerman, M., Sax, K., Williams, J., McElroy, S., & Strakowski, S. 1999. Traumatic brain injury in individuals convicted of sexual offenses with and without bipolar disorder. *Psychiatry Research*, 89, 281-286.

<sup>7</sup> Maruschak, L., Bronson, J., & Alper, M. 2021. *Survey of Prison Inmates, 2016: Veterans in Prison*. U.S. Department of Justice. Office of Justice Programs. Bureau of Justice Statistics.

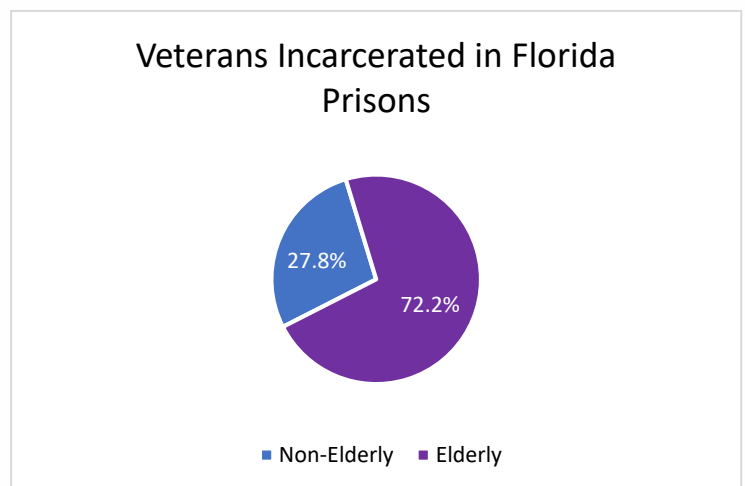
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Among all other types of offenses, including non-sexual violent offenses, veterans are less likely to be incarcerated than non-veterans. Given how few veterans are incarcerated for less serious offenses like drug, property, or public order offenses, this may be an indicator that diversionary programs like VJO and Veterans' Treatment Courts are helping veterans avoid prison while getting their lives back on track. Keeping veterans out of prison is important, but in addition to suffering from serious mental health issues, those who end up incarcerated often are serving lengthy sentences and growing old in prison—increasing the cost of caring for them during their incarceration.

Veterans incarcerated in Florida tend to be serving sentences that exceed 10 years. Over 75% of veterans are serving a sentence over 10 years and almost 58% are serving sentences that exceed 20 years. This is likely due to the fact that over 80% of veterans in Florida prisons are incarcerated for a violent or sexual offense. Given the long sentences being served by veterans incarcerated in Florida, it is unsurprising that many of them are elderly. Over 72% of veterans incarcerated in Florida prisons are over the age of 50 qualifying them as elderly according to Florida Statute 944.02. In fact, the overall average age of veterans incarcerated in Florida prisons exceeds 50 years old. As the Florida Policy Project (<https://floridapolicyproject.com/research/>) detailed in another report, elderly incarceration is increasingly expensive.<sup>8</sup> Facilities that house more people over the age of 50 spend 14 times more on prescription drugs and five times more on medical care.<sup>9</sup>

Florida Veterans' Sentence Length	
5 years or fewer	12.9%
5 to 10 years	10.5%
10 to 20 years	18.8%
20 years or more	57.9%



<sup>8</sup> Baker, T. 2023. Addressing the Elderly Prison Population in Florida. Florida Policy Project.

<sup>9</sup> U.S. Department of Justice. Office of the Inspector General. 2016. The Impact of an Aging Inmate Population on the Federal Bureau of Prisons.

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Previous reports from the Florida Policy Project (<https://floridapolicyproject.com/research/>) provide important details on general reentry initiatives as well as elderly specific programs that would benefit Florida's incarcerated veterans. However, there are additional veteran-specific programs that Florida policymakers and correctional practitioners should consider implementing. What follows are details of these best practices and recommendations to help ensure no veteran, regardless of their criminal record, is left behind.

## Best Practice: Identify and Provide Data on Veterans in Prison

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In order to provide services for veterans, it is important to identify who qualifies as a veteran. While Florida Statute and the U.S. Code differ in their definition of "veteran," agencies typically just ask people to self-identify. Unfortunately, this often results in underreporting. In addition to allowing inmates to self-identify as military veterans, all inmates should be run through the Veteran Re-entry Search Service (VRSS, detailed more below) to ensure proper identification and services are made available for eligible veterans. The legislature should also require the Florida Department of Corrections to annually publish data on incarcerated veterans as part of their *Annual Report* in a manner similar to their reporting on elderly inmates and include veterans in their annual *Prison Recidivism Report*. This additional data will provide policymakers, practitioners, the VA, and non-profits with critical information about the scope and needs of the incarcerated veteran population in Florida.

Veterans Re-Entry Search Service (VRSS) provides criminal justice agencies with the ability to identify people in their custody who served in the military. The VA provides this service so they can direct their own outreach to justice-involved veterans. The VRSS also allows the VA to develop and implement programs as needed.<sup>10</sup>

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<sup>10</sup> <https://vrss.va.gov/>



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## Best Practice: Veterans-only Housing Units

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Veteran housing units have been introduced around the U.S. including Florida. These housing units are veterans only and often reflect the discipline and rigor of active-duty military service. They mirror the therapeutic community housing units often used for other groups of people like those with substance use disorders. Broadly, the program is meant to connect veterans with structure through shared military culture, rehabilitative services, and peer connections, with the ultimate goal of reducing recidivism. In Florida, the housing units have been staffed by correctional officers who are military veterans, as well. Although therapeutic communities are generally considered to represent a best-practice, only one veterans housing unit program has been evaluated by the Office of Justice Program, and it was conducted in a jail rather than a prison. This program is detailed more below but similar housing units such as those used in Florida should be evaluated for short-term and long-term efficacy.

## Veterans Moving Forward (San Diego, CA)

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This jail-based program created a separate housing unit of justice-involved veterans. The environment created in the unit was meant to be rehabilitative and promote shared military culture and emphasized open doors and fewer movement restrictions. Participants received one-on-one counseling and day-to-day program management. The program follows an Incentive Based Housing approach where participation and positive behavior is rewarded with increased privileges such as microwave and coffee machine use, entertainment (games, movies), extra bedding, writing utensils, and a barber cart. The program produced positive outcomes with 16% of participants recidivating in the first 12-months of release compared to 27% among the comparison group. While similar programs exist in prisons, they have not been evaluated and so their efficacy is unknown.<sup>11</sup>

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<sup>11</sup> Burke, C., Keaton, S., Schroeder, G., & Ocheltree, K. 2019. *Veterans Moving Forward: Process and Impact Evaluation Results of the San Diego County Sheriff's Department VMF Program*. San Diego, Calif.: SANDAG.



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## Best Practice: Trauma-Informed Mental Health Care

In-prison mental health care can take numerous forms. Mental health care including cognitive behavioral treatments may be effective for reducing substance abuse.<sup>12</sup> Similar treatment may be used for improving everyday behavior or reducing anger or other cognitive behavioral problems.<sup>13</sup> Pharmaceutical interventions may be useful for treating depression, anxiety, or other psychological issues. Veterans will likely benefit from all of these treatments. However, for veteran-specific needs mental health care must also include treatment that directly addresses posttraumatic stress disorder, military sexual trauma, and traumatic brain injury. That is, the mental health care of veterans must involve trauma-informed care. Programs detailed below have been evaluated as promising or effective in treating trauma-related violence and offending, however, they have not been evaluated among incarcerated veterans. Implementation of these programs should be done on a pilot basis until efficacy in an incarcerated population can be established.

## Strength at Home Men's Program (Massachusetts & Rhode Island)

This program focuses on the link between trauma and interpersonal violence. It involves weekly group therapy, cognitive behavioral therapy, conflict resolution, stress management, and communication skills. Recognizing trauma while ensuring accountability for violent behavior is a key component of this therapy.<sup>14</sup> Evaluations of the program find reductions in aggression and intimate partner violence.<sup>15</sup>

## Trauma Affect Regulation: Guide for Education and Therapy (TARGET, Connecticut)

Delivered through a one-on-one or group setting TARGET aims to educate participants about substance abuse and PTSD, provide information on emotion regulation, and develop personal narratives related to experienced trauma and PTSD. Therapeutic sessions try to reframe trauma as normal reactions to abnormal events. Outcome evaluations show promise in reducing PTSD, depression, anxiety, and emotion regulation. However, the program has only been evaluated among females.<sup>16</sup>

<sup>12</sup> Blonigen, D. M., Finney, J. W., Wilbourne, P., & Moos, R. H. (2015). Psychosocial treatments for substance use disorders. In P. E. Nathan & J. M. Gorman (Eds.), *A guide to treatments that work* (4th ed.). New York, NY: Oxford University Press.

<sup>13</sup> Friendship, C., Blud, L., Erikson, M., Travers, R., & Thornton, D. 2003. "Cognitive-Behavioural Treatment for Imprisoned Offenders: An Evaluation of HM Prison Service's Cognitive Skills Programmes." *Legal and Criminological Psychology*, 8, 103–14.

<sup>14</sup> Creech, S., Macdonald, A., Benzer, J., Poole, G., Murphy, C., Taft, C., & Davila, J. 2017. PTSD Symptoms Predict Outcome in Trauma-Informed Treatment of Intimate Partner Aggression. *Journal of Consulting and Clinical Psychology* 85(10):966–974.

<sup>15</sup> Taft, C., Murphy, C., & Creech, S. 2016. *Trauma-Informed Treatment and Prevention of Intimate Partner Violence. First Edition*. Washington, D.C.: American Psychological Association.

<sup>16</sup> Ford, J., Steinberg, K., Moffitt, K., & Zhang, W. 2008. *Breaking the Cycle of Trauma and Criminal Justice Involvement: The mothers overcoming and managing stress (MOMS) study*. Final Report to the U.S. Department of Justice.

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## Best Practice: Veteran Transitional Services

Veteran's transitional services are different from those of most other people leaving prison. In previous reports, we have described the potential impact of continuing care from supervision into the community after release. Providing similar services for returning veterans is important. However, veterans may present additional needs as a result of their military service that were previously unmet in the community. Continuity of care should be emphasized to reduce the chance that these unmet needs result in homelessness, substance abuse, and/or recidivism. The VA offers a number of resources including the Healthcare for Reentry Veterans Program (HCRV) that assist with veterans' transition from prison to the community. Reentry Specialists from the Veterans Health Administration coordinate with reentering veterans to connect them with VA benefits, healthcare, housing, and employment in addition to other services.

## Veterans Reentry Roadmap (Virginia)

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Virginia provides veterans incarcerated in their state prisons and their family members with a roadmap describing the various benefits they may be entitled to in order to make the transition from prison to the community smoother. According to the reentry roadmap the goal of the manual is to “help you connect with various people, organizations, and services which can provide you with veteran specific guidance within your own community.<sup>17</sup>” The resource manual has chapters on VA benefits, Virginia Department of Veteran Services benefits, resources for veterans who are ineligible for VA benefits, and various private/non-profit organizations that will assist veterans returning home from incarceration.

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<sup>17</sup> Virginia Department of Corrections. 2018. *A Re-Entry Roadmap for Veterans Incarcerated in Virginia*. (p. 3)

### Release to Home Confinement: Elderly Offender Pilot Program (Federal Bureau of Prisons)

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A program modeled after the elderly offender home confinement pilot program currently under way at the federal level should be refashioned at the state level and include special dispensation for veterans (especially elderly veterans). Participants would be released to home confinement making them eligible for VA care, access to retirement benefits, Medicare/Medicaid, and Social Security, none of which they are eligible for while incarcerated.<sup>18</sup> The program could deploy various safeguards to minimize risk including electronic monitoring, community supervision, and continuous mental health treatment via the VA or other provider.

#### Recommendations:

1. Deploy system-wide use of the Veteran Re-entry Search Service to ensure veterans are identified and connected with veteran specific services.
2. Publish veteran statistics in the FDOC Annual Report and Recidivism Report detailing demographic information of incarcerated veterans similar to what FDOC does for elderly inmates.
3. Expand the use of veteran's only housing units and fund a pilot program using the Veterans Moving Forward framework.
4. Fund the expansion of trauma-informed mental health care, especially among incarcerated veterans who present symptoms of PTSD and TBI.
5. Appropriate funds for the development of a reentry roadmap for veterans incarcerated in Florida.
6. Fund a pilot program that uses home confinement for veterans who meet certain eligibility criteria such as age, time-served in current sentence, and offense seriousness.

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<sup>18</sup> "Bureau of Prison Eligibility and Capacity Impact Use of Flexibilities to Reduce Inmates' Time in Prison" 2012. Report to Congressional Requesters by the United State Government Accountability Office.

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## Conclusion

No veteran, even veterans serving time in prison, should be left behind. Unfortunately, Florida likely underestimates the number of veterans currently incarcerated in its prisons and fails to connect many eligible veterans with much needed services. Veterans who find themselves incarcerated are often faced with difficult circumstances such as homelessness, substance abuse, and serious mental health issues. They are growing old in prison and are not receiving the care they earned but so often need. The goal is to find solutions that can provide veterans with necessary services and prepare them for a successful reentry to their communities.

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