

Fighting for our Nation's Warriors: Effectively Representing Veterans and Developing Veterans' Courts

- **Introduction**

- **Issues confronting veterans**

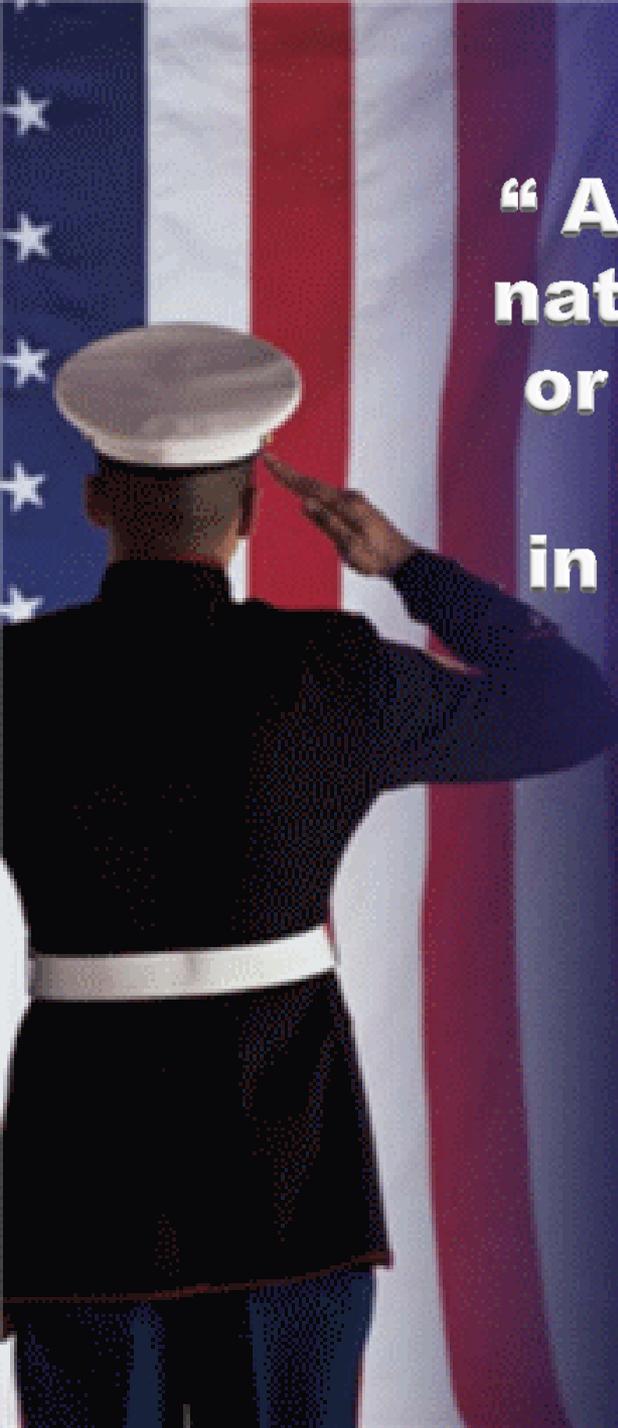
- **Milwaukee Veterans Treatment Initiative**

- **Partner organizations**

- **Civil legal resources**

- **Veterans programs statewide**





“ A veteran – whether active duty, national guard or reserve, retired, or discharged from any of these - is someone who, at one point in their life, wrote a blank check made payable to ‘The United States of America,’ for an amount of ‘up to and including my life.’... ”

Author Unknown

Now After Video



Issues confronting veterans

- 25 million veterans of the U.S. Armed Forces alive today (7.5 % are women).
- 37 million dependents (spouses and dependent children) of living and deceased veterans.
- Veterans + dependants = 20% of the U.S. population.
- 5.2 million have served from the gulf war to present.
- Vietnam Era veteran = 7.9 million
- Since 9/11, 2 million veterans have served in Iraq or Afghanistan.



Impact of Iraq War (Operation Iraqi Freedom/New Dawn)

During tour:

- 47% saw someone wounded or killed, or saw a dead body
- 45% felt they were in great danger of being killed during their tour

After returning home:

- 14% had an experience that left them easily startled
- 6% wanted help for stress, emotional, alcohol or family problems
- 2% had thoughts of hurting someone or losing control
- 1% had thoughts that they might be better off dead or could hurt themselves
- 19% were bothered by finding little interest or pleasure in doing things
- 14% were bothered by feelings of depression or hopelessness
- 9% had an experience that gave them nightmares or that they thought about when they didn't want to
- 3% worried about serious conflicts with their spouse, family or close friends



10,000 returning every month

The Transition: Civilian – Military - Civilian



Typical Army Reserve Center

- 90% Civilian
- Raised mainly in Corporate America
- Only Active Duty was for schools
- Ltd Family Programs / Family care experience
- Unexpected call up (Even if you “know”)
- Little or no military support system
- Military experience and skills may be limited to 2 days a month (ie.medic)
- May be in critical civilian positions (no job when they return)
- Typically do not ask for help until it is too late; last resort
- Support systems do not understand the military culture
- 254,000 army reservists and 332,000 national guardsman have deployed to Iraq or Afghanistan

Women Veterans

- 1.8 million of today's veterans (7.5%) are women
- Women = 20% of all military personnel
- 182,000 served in Iraq or Afghanistan



Stressors During Deployment

- 
- Lack of/too much communication
 - Lack of freedom of movement
 - Environmental / climate changes
 - Isolation & boredom
 - Poor sleep patterns
 - Home-front worries
 - Repetitious & routine duties
 - Separation from loved ones
 - Unclear / misunderstood mission
 - Uncertain redeployment date

- Operations Tempo
- Cultural Differences
- Lack of personal time
- Threat of attack
- Observation of atrocities
- Taking of life, watching others die
- Recovering the dead
- Breaking of personal moral code
- Experiencing abuse or harassment
- Poor Leadership

WAR COPING SKILLS



HOME COPING SKILLS

War vs. Home – Mission Oriented

WAR

- Once a mission is assigned other, unrelated tasks, are unimportant
- Decisions need to be quick, clear, accurate
- No time for discussion

“one person talks
- everyone listens”

HOME/JOB/SCHOOL

- Multiple competing tasks cause confusion
- Get angry with those who get in the way of mission
- Difficulty participating in cooperative decision making
- Frustration with others

“everyone talks
- everyone or no one listens”

Civilians = 9000+ decisions
Service Members = 3000

War vs. Home - Talking

WAR

- Difficulty talking
“can’t be seen as weak”
- Little or no time to talk about powerful events
- Can change world view and of self
BUT unable to articulate changes

“I didn’t feel
safe anymore”

HOME/JOB/SCHOOL

- More comfortable talking with battle buddies
- “Civillianeze” foreign language
- Being unable to talk may keep sm/vet from feeling a part of home life
- Social chatter a waste
 - “very direct communication (cold, not friendly)”
 - Give little information

“strong feelings of frustration because nobody to talk with, or to, and nobody understands”

War vs. Home - Safety and Trust

WAR

- Vigilance pays off
- Never Relax
- Assume everyone is the enemy

“suspicious of others and things you have known & trusted”

HOME/JOB/SCHOOL

- Avoid getting involved
- Suspicious of everyone
- Test people to earn trust
- Always on guard
- Isolative
- Difficulty attending activities, going out in public, feeling safe with anyone but other service members.

“being suspicious isolates you”

War vs. Home – Emotions/Anger



“NOT talking about your emotions in war (strength) only leads to CAN'T talk about emotions at home (weak)”

WAR

- Control emotions
- Numbing (It don't matter)
- Anger useful, protective, is a survival skill

HOME/JOB/SCHOOL

- Insensitivity to others
“look hot headed, hard headed”
- Decreased ability to read others emotions
“you look / act emotionless”
- Decreased emotional enjoyment
- Irritability/defensiveness
- Increased aggression
“fed by constant frustration”
- Increased alcohol/drug use to avoid feeling emotions

War vs. Home – Hypervigilance

“Adrenaline RUSH”

WAR

- A year or more of daily hypervigilance



HOME/JOB/SCHOOL

- Inability to relax
- Sleep changes
 - “too little / too much”
- Difficulty functioning without the adrenaline rush, CRASH
- Dreams
- Monitoring environment/perimeter

Common Emerging Issues



- 
- **Motor vehicle accidents**
 - **Reintegration difficulties (family)**
 - **Divorce/ Relationship Issues**
 - **Domestic Violence**
 - **Drug addiction/Alcoholism**
 - **Medical & Mental Health problems**
 - **Military Sexual Trauma (MST)**
 - **Traumatic Brain Injury(TBI)**
 - **Combat Operational Stress Reaction (COSR) vs. Post Traumatic Stress Syndrome (PTSD)**
 - **Suicide**
 - **Homelessness**
 - **Unemployment**
 - **Justice Involved Veterans**

Motor Vehicle Accidents



Attempts to relive the “RUSH”

Aug 2012: Fatal motorcycle accidents for Soldiers this year rose by 14 percent from the same time frame in 2011



Hypervigilance:
“Adrenaline RUSH”

Reintegration: How have family members changed?

- More independent
- Used to making their own decisions
- New friends/relationships
- Children may be significantly different
- New routines
- New perspectives
- Changes in the environment
- “I was angry for months, my wife and kids had grown without me”

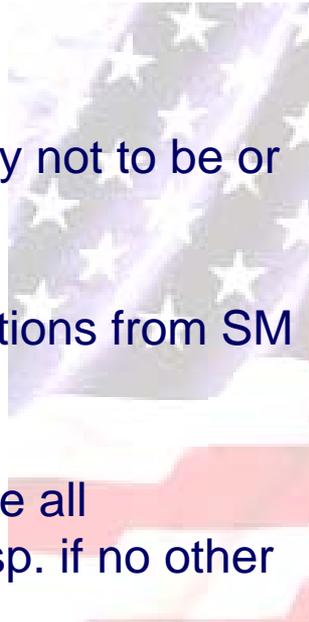


Emotions/Anger---FAMILY

Talking about emotions at home (strength)

WAR

- Control emotions, try not to be or show anger
- May hold back emotions from SM to protect them
- May “dump” or share all emotions with SM esp. if no other support systems
- May have increased emotional needs due to stress



HOME/JOB/SCHOOL

- May want to return to pre-deployment emotional exchange immediately
- Difficulty understanding and dealing with SM change in emotional responses
- May hold back as a defensive response to SM

Domestic violence rose 33 percent from 2006 to 2011.

ALCOHOL & DRUG USE



- 
- Increased use noted among returning service members
 - Self-medicate
 - Sleep
 - Increase feelings of invincibility
 - Avoid feelings
 - Means of social support
 - Excuse for behaviors
 - Decreases potential for eventual reintegration
 - May lead to job loss, family loss, legal problems, suicide

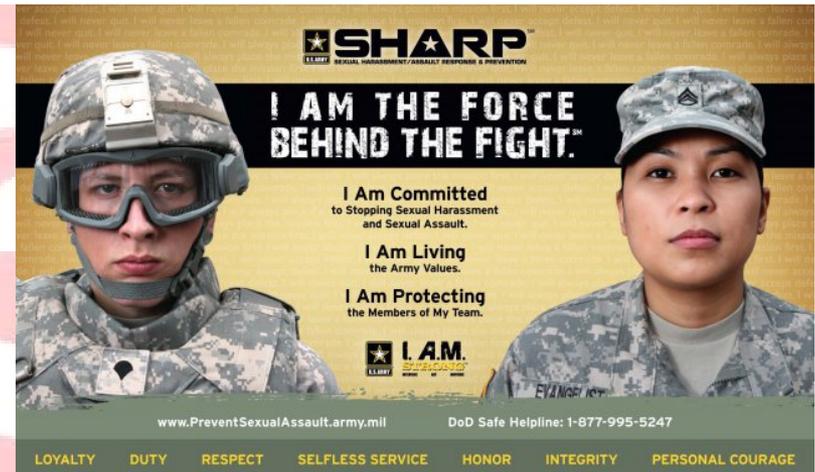
COSR vs PTSD

- COSR: expected and predictable emotional, intellectual, physical, and or behavioral reactions from exposure to stressful events
- PTSD:
 - Exposure to an *extreme traumatic stressor*
 - actual or threatened death or serious injury or other threat
 - Witnessing such event
 - Same event experienced by a family member or other close associate.
- Person's response to event must involve intense fear, helplessness or horror.
- Symptoms
 - Increased Arousal
 - Persistent avoidance
 - Persistent reexperiencing

Duration: longer than 30 days

Military Sexual Trauma

- sexual assault or repeated, threatening sexual harassment that occurred while the Veteran was in the military
- Perpetrators are usually known to the victim
- Victims are typically young
- The military is like a family
- The military is hierarchical and authoritarian
- Military culture places a premium on strength, self sufficiency and loyalty
- Victims are in conditions of relative entrapment (restricted freedom of movement)
- Re-exposure and re-victimization are likely



Violent sex crime was up 64 percent from 2006 to 2011

Traumatic Brain Injury

A blow or jolt to the head or a penetrating head injury that disrupts the function of the brain.

MILD: 80% a brief change in mental status or consciousness

MODERATE: 10%

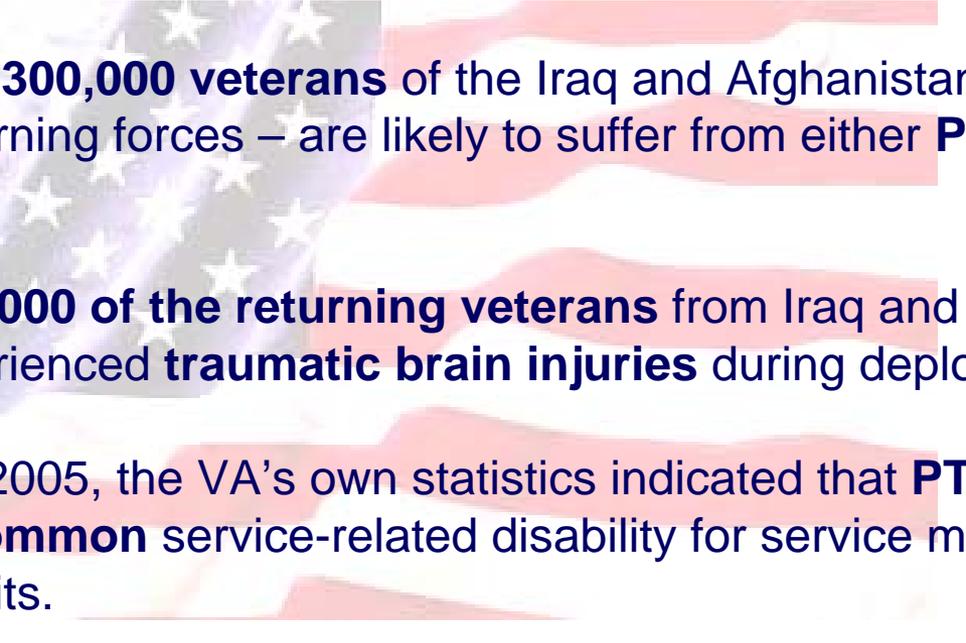
SEVERE : 10% extended period of consciousness or amnesia after the injury

May Mirror PTSD

SYMPTOMS

- Impaired hearing, vision, speech
- Balance problems
- Fatigue
- Seizures
- Memory loss
- Concentration or processing difficulty
- Organizational problems
- Spatial disorientation

Significance

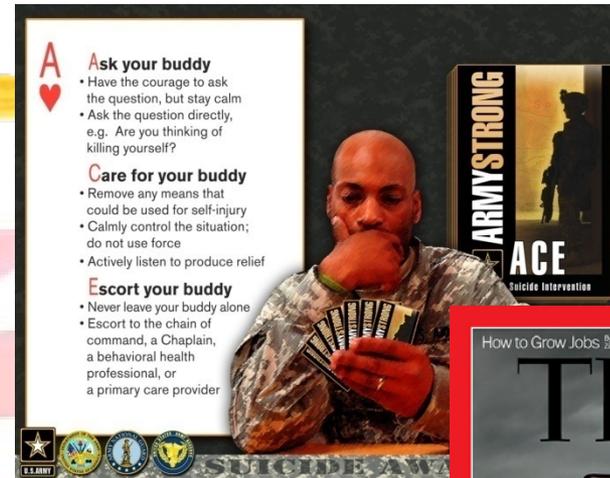


- Approximately **300,000 veterans** of the Iraq and Afghanistan wars – nearly 20% of the returning forces – are likely to suffer from either **PTSD or major depression**
- additional **320,000 of the returning veterans** from Iraq and Afghanistan may have experienced **traumatic brain injuries** during deployment.
- By fiscal year 2005, the VA's own statistics indicated that **PTSD** was the **fourth most common** service-related disability for service members receiving benefits.
- While there is no cure for PTSD, early identification and treatment of PTSD symptoms may lessen the severity of the condition and improve the overall quality of life for veterans suffering from this condition.

Suicide

Suicide rates:

- 2010: 301
- 2011: 283
- 154 in 1st 155 days of 2012
- suicide rate **7.5 x** the national average.
- Female veterans are 2-3x more likely to commit suicide than non-veteran women
- Approx **1000 attempts each month** by veterans who are receiving some type of treatment



One veteran attempts suicide every 80 minutes

Center for a New American Security Suicide Report Oct 2011

Homelessness

- 30% of homeless are veterans – approx 150,000
- 67,000 will be homeless tonight
- 5% are women veterans
- Women veterans are 4x more likely to be homeless than males
- Veterans are 50% more likely to become homeless than non-veterans



Unemployment

- Currently 9.7% for veterans of Iraq and Afghanistan
- 19.9% for women veterans
- 23.5% for veterans 18-24



Justice Involved Vets

United States Jail and Prison Population

- **9.4%** are veterans
- **39%** of incarcerated vets report psychiatric problems
- **25%** of incarcerated vets report co-occurring disorders
- Interviews conducted post Vietnam in 1986-1988 found that among male veterans of Vietnam with current PTSD (15% of all Vietnam Vets) nearly half had been **arrested** one or more times = **223,000 veterans**.



Veterans Dorm in
Muscogee Co, GA

Veterans Treatment Initiative



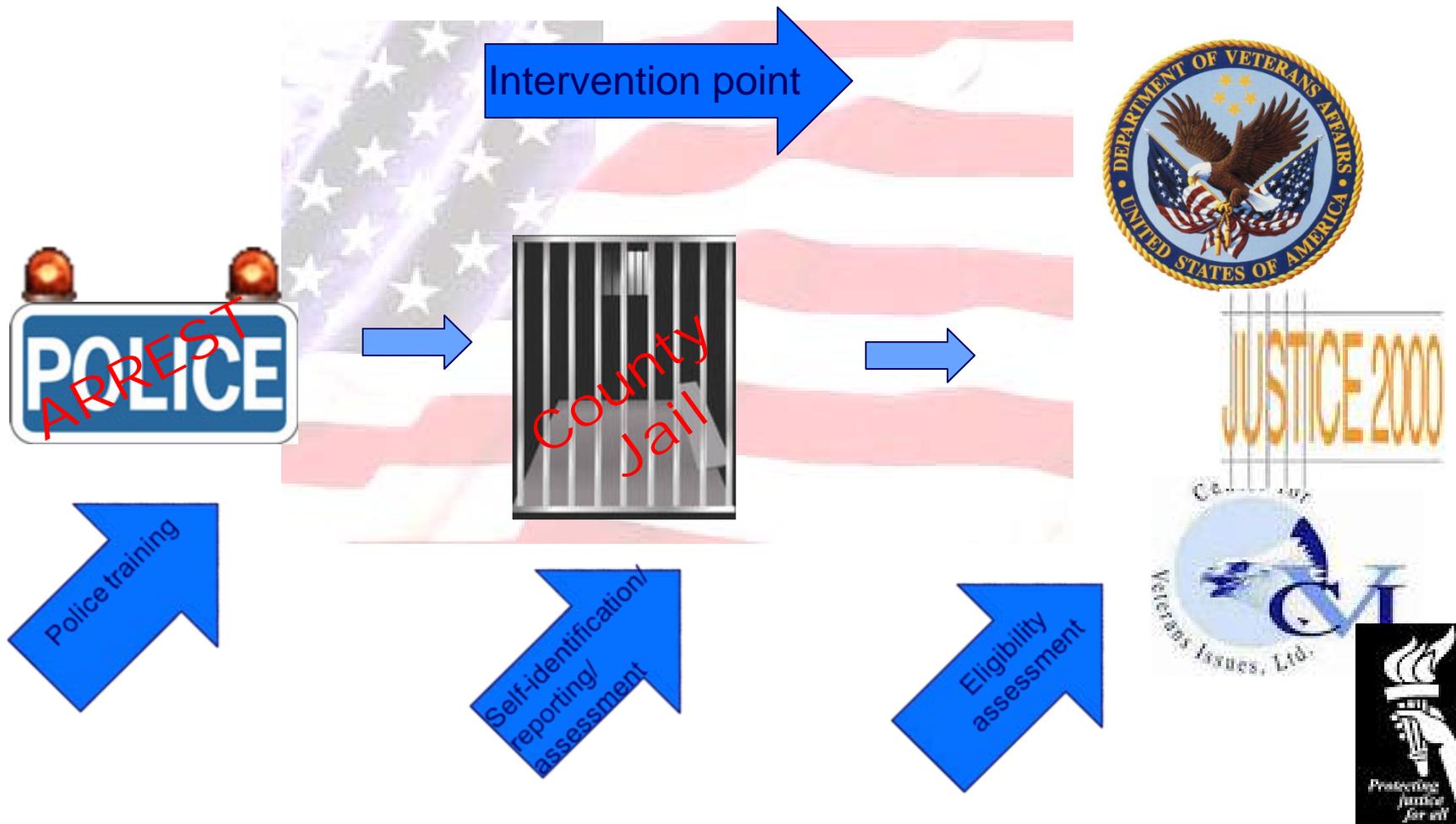
Mission: To successfully habilitate veterans in recognition of their service to our country and the challenges it may present to them and their families by diverting them from the traditional criminal justice system and providing them with the tools they will need to lead a productive and law-abiding life.

Target population: U.S. Military Veterans suffering from a diagnosable and treatable behavioral health issue that has contributed to the commission of a criminal offense and who are in need of the structure and support available through the VTI

Eligibility:

- Service in the United States Armed Forces (all discharges will be considered)
- Diagnosed with a treatable behavioral issue which is substantially related to the offense
- Pending Milwaukee County circuit court charges
- Able to attend all required sessions of the VTI court
- Approved by the VTI team to determine appropriateness for participation

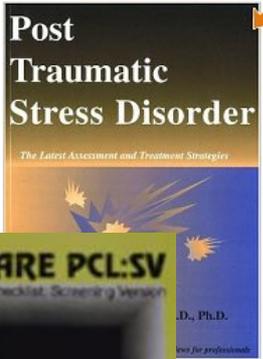
Veterans Treatment Initiative



Veterans Treatment Initiative



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STATE OF WISCONSIN - CIRCUIT COURT - MILWAUKEE COUNTY
Branch 021373
Hon. Ramon Christiansen

STATE OF WISCONSIN, Plaintiff,
v.
BRIAN HELL, Defendant.
Case No. 0202816

DEFERRED PROTECTION AGREEMENT

The State of Wisconsin, by Assistant District Attorney Gail A. [redacted] and the defendant, personally and with counsel [redacted], hereby move the court to accept the following Deferred Protection Agreement pursuant to Wisconsin State Statute 971.37(1):

- The defendant will plead guilty to the charge of first degree sexual assault in Milwaukee County Circuit Court Case Number 0202816 pursuant to Wisconsin State Statute 971.41 and 971.42 as charged in the original complaint.
- The parties ask that the court find that the defendant's plea was knowing, intelligent, and voluntary. Find a factual basis for the plea, accept the defendant's plea, and suspend the proceedings pursuant to Wisconsin State Statute 971.37(1a)(b) and 971.37(1), and delay entry of the judgment of conviction for 2 month judicial periods.
- If the defendant enters a plea to any felony offense pursuant to this agreement, the defendant is prohibited from possessing a firearm while this agreement is in effect, and a violation of this term may result in termination of the agreement and resumption of full sentencing charges.
- The defendant waives the right to a jury trial, the right to a speedy trial, the right to confront the State's witnesses, the right to remain silent, and the right to have the charge proven beyond a reasonable doubt at trial.

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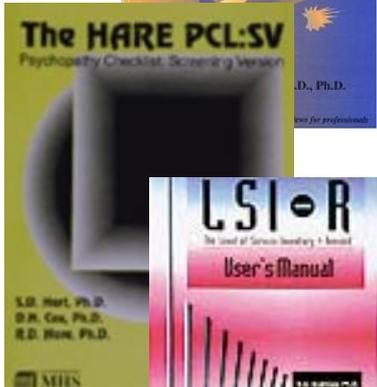


Diversion

DPA

Treatment Court

RISK/NEEDS



LO

MED

HI

STATE OF WISCONSIN - CIRCUIT COURT - MILWAUKEE COUNTY
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DSA

Enhanced Probation



VTI programs

Diversions/DPAs

- Defendant pleads guilty/enters into agreement.
- Duration= generally 6 mon.
- Monthly compliance reports by monitoring agent to parties.
- Compliance = drug treatment, anger management, restitution, etc.
- Monthly staffings w/ monitoring agent/DA/defense.
- **Court oversight:**
 - designated court.
 - Subsequent review dates (3, 6 months, or as needed).
- **Diversion:** no process
- **DPA:** successful completion dismissal, reduced charges, etc.
- **OWI programs:**
 - Misdemeanor 2, 3, 4
 - Guilty plea, monitoring by vets court
 - DSA: reduced offer – sentencing
 - Enhanced probation: 3rd, 4th OWI probation, mandatory min a conditional time with concurrent monitoring:
 - Success: minimal sentence/conditional time and termination of probation at 18 mon



Exclusions



- **Residential Burglary:** victim must agree to DPA
- **Firearms charges:** ineligible.
- **History of Firearms:**
 - Felony: ineligible.
 - misdemeanor: 5 years or older
- **Felony sex offenses:** requires approval by Sensitive Crimes Deputy District Attorney
- **Crimes of Violence:** ineligible (history of homicide or great bodily harm per Sec 393.20(14)).
- **Public Welfare and Entitlement:** (defraud or attempt to defraud a State of Wisconsin Agency e.g., Worker's Compensation, Unemployment Compensation, W2, etc.) requires approval by the Deputy District Attorney
- **Domestic Violence:** case by case basis for DPA consideration by the Domestic Violence Team Captain or a Deputy District Attorney.
- **Gang Involved:** (history of arrests and criminal convictions for gang related activity) requires approval by the Deputy District Attorney.
- **Drug Offenses:**
 - 500 or more grams of marijuana, or
 - 5 or more grams of cocaine, or
 - 3 or more grams of heroin, or
 - 5400 or more milligrams of Oxycodone (180 pills of 30 mg Oxy or 68 pills of 80 mg pills) or
 - 180 or more pills of Schedule II Narcotics (morphine, etc) or
 - 200 or more pills of Schedule III through V controlled substances or
 - ongoing pattern of distributing drugs over a period of six months or more for the sole or primary purpose of supporting themselves and/or others through the financial gains derived from drug distribution



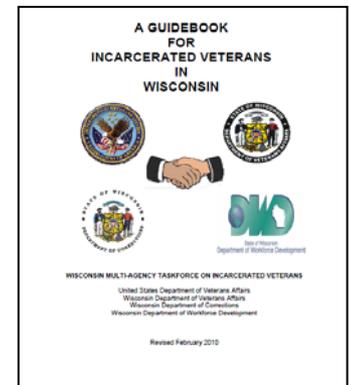
Partner Organizations

Agencies that have agreed to supervise Diversions, DPA/DSA, enhanced Probation, Vets Court

- VA – Veterans Justice Outreach Coordinator (VJO)
- Center for veterans issues (CVI) reintegration support coordinator
- Dept of Corrections
- Justice 2000
- Milwaukee County Behavioral Health Division/WISER Choice

Partner agencies that provide services/assistance to vets:

- Vet Center – www.vetcenter.va.gov
- Wisconsin Dept of Veterans Affairs 1-800-WIS-VETS (947-8387) – www.WisVets.com
- Wisconsin Department of Workforce Development – www.dwd.wisconsin.gov
- Wisconsin Department of Workforce Development – Virtual Job Center www.wisconsinjobcenter.org
- Disabled American Veterans (National) – www.dav.org/
- Veterans of Foreign Wars (Dept of WI) – www.vfwofwi.com
- Vietnam Veterans of America (National) – www.vva.org/
- Social Security Administration – www.ssa.gov/
- National Coalition for Homeless Veterans – www.nchv.org
- National Alliance to End Homelessness – www.endhomelessness.org
- AMVETS 1-877-726-8387 – www.amvets.org
- Blinded Veterans Association 1-800-669-7079 – www.bva.org
- Military Order of the Purple Heart 1-414-902-5742 – www.purpleheart.org
- Paralyzed Veterans of America 1-800-424-8200 – www.pva.org
- Disabled American Veterans Service Officer 1-414-902-5736 – www.dav.org
- The American Legion Service Officer 1-414-902-5722 – www.legion.org
- Ho-Chunk Nation VSO 1-800-294-9343
- Oneida National Veterans Service Officer 1-920-490-3921
- Veterans of Foreign Wars Service Officer 1-414-902-5748 – www.vfw.org



VJOs

Purpose

- To establish a Veteran's track within the courts system that will facilitate eligible veterans who are charged with low level criminal offenses into treatment, rehabilitation, education, employment and judicial monitoring.
- To establish an intervention and support "Network" to ensure easy and timely access to services for program eligible veterans.
- To support prevention, early intervention, and education that will reduce the negative impact of combat experiences on veterans and create individualized functional case management plans for veterans engaged in the Veteran Justice Outreach Program.



VJOs by Region

- **Tomah:** Gary Hebel (608) 567-1225
- **Iron Mtn:** Mike Matwyuk (906) 774-3300
- **Minneapolis:** David Holewinski (612) 467-5082
- **Madison:** Ed Zapala (608) 256-1901
- **Milwaukee:** Abby Ziebell (414) 882-3375
- **Chicago:** Lauran Olson (312) 569-6998
- **North Chicago:** Walter Kelly (224) 610-4845

VA "Cans/Cant's"

Can...

- Reach out to law enforcement, jails, and courts;
- Provide comprehensive healthcare services of non-incarcerated veterans;
- With Veteran consent, communicate essentials (attendance, progress, tx testing, d/c plan);
- Serve all veteran eras;
- Function as court team member;
- Assess veteran's healthcare needs, identify appropriate VA and non-VA services;
- Refer and link veteran to services, act as a liaison.
- Provide EBT for court-monitored veterans. (non-incarcerated)

Can't...

- Provide treatment to veteran in custody (incarcerated including work release);
- complete Diversion paperwork;
- Serve only OEF/OIF veterans;
- Decide criminal justice criteria for veteran court participation or decide who gains admission to specialty treatment court;
- Perform forensic psychiatric or psychological evaluation for the court;
- Guarantee program acceptance;
- Advocate for legislation;
- Serve VHA ineligible Veterans.

VA Programming available: pre-trial/re-entry

Outpatient services

- Several substance abuse treatment programs including sustained relapse prevention
- Diagnosis Specific Treatment (Bipolar, PTSD, Depression, Etc.)
- Anger Management and Domestic Violence Treatment
- Individual Therapy
- Medication Management
- Suicide Prevention Treatment/support
- Grief Groups
- Pain Management
- Trauma Recovery

Inpatient services

- Residential treatment (45 days) for Substance abuse, PTSD, and other Mental Health diagnoses
- Detox/Stabilization Facilities (locked)
- Mental Health Acute Transition Unit (non-locked)
- Home based primary care: multidisciplinary programming for homebound vets with chronic mental illness

Homelessness

- Domiciliary care for homeless veterans: residential rehab program
- Homeless providers grant and per diem program: transitional housing (In Milwaukee and Union Grove – also Contract Transitional Housing out of state)
- Healthcare re-entry for vets: pre-release and re-entry linkage/coordination of services
- HUD/VA supported housing: long term housing for vets/families

Other

- Coping skills: skills group addressing jobs, money mgmt, healthy lifestyle

CVI



•Assisting incarcerated and newly released veterans transition back into the Milwaukee community.

•Programming includes:

•**employment**

•health care (thru wiser choice)

•mental health (thru wiser choice)

•**housing**

•**intensive case management**

•Incarcerated Veterans releasing from Racine/Oshkosh Correctional/ Milwaukee County/Milwaukee Secure Detention Facility



Mentors



Dryhootch Mission: provides Wisconsin's veterans and their families with a stable, substance-free environment to gather, grow, and enhance their post-service life experience.

Band of Brothers and Sisters Project, (BoBS): peer-to-peer recovery support services program specifically for veterans in the Milwaukee community that have a substance abuse disorder

Services:

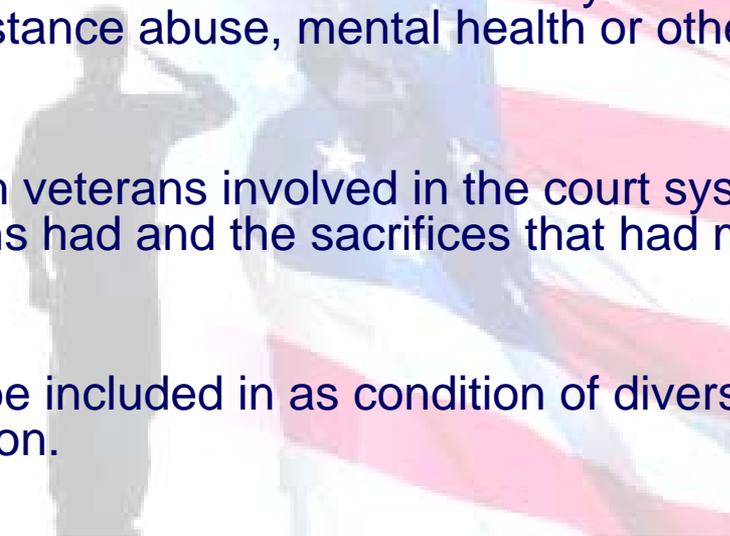
Mentoring/Coaching.

Recovery Groups.

Socialization Activities.

Mentors – what are they

- Mentors working with veterans involved in the court system helps to reduce risks associated with substance abuse, mental health or other behavioral issues.
- Military Mentors bond with veterans involved in the court system due to shared values the veterans had and the sacrifices that had made while in the military.
- Mentor participation can be included in as condition of diversion, deferral, treatment court participation.



Veteran's Court

95 Locations around US including:

- Tulsa, Oklahoma
- Rochester, NY
- Las Vegas, Nevada
- Pittsburg, Pennsylvania
- Phoenix, Arizona
- Minneapolis, MN
- San Jose, CA
- Houston, TX



Judge Robert Russell,
Veterans Court, Buffalo, NY

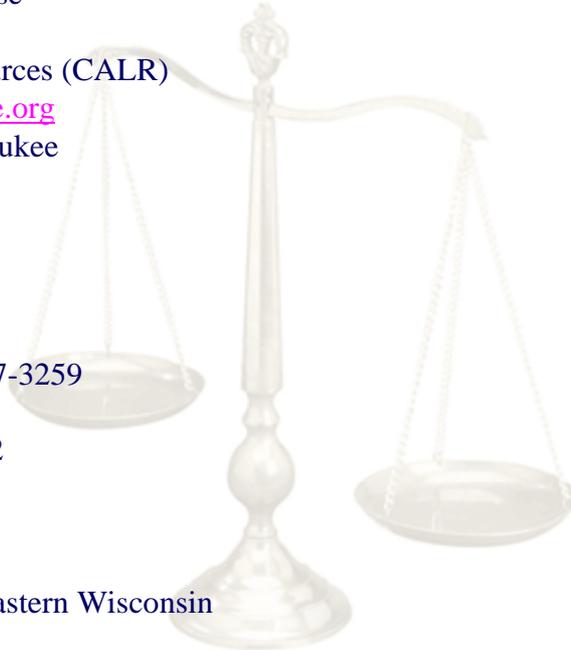


Judge Russell with VA secy
GEN Eric Shinseki



Civil Legal Needs

- Milwaukee Bar Association-
lawyer referral information service
Phone: 414.274.6768
www.milwbar.org/legalresources/lris.htm
- Milwaukee Justice Center
Milwaukee County Courthouse
901 N. 9th Street G9
- Coalition for Access to Legal Resources (CALR)
www.legalhelpmilwaukee.org
- Legal Action of Wisconsin – Milwaukee
230 West Wells Street
Milwaukee, WI 53203
Phone: 414-278-7722
FAX: 414-278-7126
Toll free: 1-888-278-0633
TTY, VCO, or HCO: 800-947-3259
- Centrolegal
614 W. National Ave. Floor 2
Milwaukee, WI 53204
Phone: 414-384-7900
Fax: 414-384-6222
- Nonprofit Legal Services of Southeastern Wisconsin
Phone:839-8892
- Marquette Volunteer Legal Clinic
 - *Milwaukee CVS0, 6419 W Greenfield, 1,3rd Mondays 4-6 pm
 - House of Peace 1702 W. Walnut, Tues 3-7 pm
 - Hillview 1615 S. 22d 3d floor, Wed 5-7 pm
 - Milwaukee Justice Center- Rm 106 Courthouse Tues, Fri 2-4 pm
- Dryhooch Family Legal Clinic
 - 1st (4-6) and 2d (5-7) Thursdays



Legal Services

LEGAL ACTION of WISCONSIN, INC.

 **CENTROLEGAL**



Questions?



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Email: mark@dryhootch.org