THE SIX PATHWAYS OF DEFLECTION AND PRE-ARREST DIVERSION

There are six frameworks or *pathways* of deflection and pre-arrest diversion, each of which uses a different approach to address specific public health and public safety challenges faced by communities. These six approaches are referred to as "pathways" because, in contrast to justice system interventions, which mandate that individuals attend treatment, programs in these pathways enable first repsonders (law enforcement, fire, and emergency medical services) and community response teams to offer access, or *pathways*, to community-based treatment and resources to support individuals in need.

The six pathways are described below:

PATHWAY	TARGET POPULATION
Self-Referral • An individual voluntarily initiates contact with a first responder agency (law enforcement, fire, or EMS) for a referral to treatment and services. If the contact is initiated with a law enforcement agency, the individual makes contact without fear of arrest.	Individuals with substance use disorder (SUD)
Active Outreach • A first responder intentionally identifies or seeks out individuals with SUD to refer them to or engage them in treatment and services; outreach is often done by a team consisting of a behavioral health professional and/or peer with lived experience.	Individuals in crisis or with non-crisis mental health disorders (MHD) and/or SUD, or are homeless
Naloxone Plus • A first responder and program partner (often a behavioral health professional or peer with lived experience) conduct outreach <i>specifically</i> to individuals who have recently experienced an opioid overdose to engage them in and provide linkages to treatment and services.	Individuals with opioid use disorder
First Responder and Officer Referral • As a preventative approach, during routine activities such as patrol or response to a service call, a first responder engages individuals and provides a referral to treatment, services, or to a case manager. (Note: if law enforcement is the first responder, no charges are filed or arrests made.)	Individuals in crisis or with non-crisis MHD and/or SUD, or in situations involving homelessness, theft, or prostitution
Officer Intervention • (Only applicable to law enforcement) During routine activities such as patrol or response to a service call during which charges otherwise would be filed, law enforcement provides a referral to treatment, services, or to a case manager, or issues a non-criminal citation to report to a program. Charges are held in abeyance until treatment and/or a social service plan is successfully completed.	Individuals in crisis or with non-crisis MHD and/or SUD, or in situations involving homelessness, theft, or prostitution
Community Response • In response to a call for service, a team comprising community-based behavioral health professionals (e.g.,	Individuals in crisis or with non-crisis



services, or to a case manager.

crisis workers, clinicians, peer specialists, etc.), and/or other credible messengers—individuals with lived

crises, mediate low-level conflicts, or address quality of life issues by providing a referral to treatment,

experience—sometimes in partnership with medical professionals, engages individuals to help de-escalate

To learn more about PTACC, contact Jac Charlier, Executive Director at info@ptaccollaborative.org

conflicts.

MHD and/or SUD, or in situations

involving homelessness or low-level