

# KEY RESEARCH FINDINGS RELATED TO PRE-ARREST DIVERSION INITIATIVES IN THE US



Pre-arrest diversion programs have been operating since the 1970's, but not until recently has research started to examine the potential benefits of these programs. Most of the current work in this area has largely focused on single programs, primarily due to their local development to meet the immediate needs of the community and its members. Recent classification efforts (i.e. PTACC's Five Pathways) have grouped programs into certain categories based on referral processes, but there are important nuances between programs that tend to preclude comparisons, especially within each of the pathways-to-treatment. Despite the lack of large-scale, multi-site evaluation efforts, there are important trends emerging from this early research on pre-arrest diversion initiatives across the US. Here are some key results drawn from empirical research on a variety of pre-arrest diversion programs.

## 1. Pre-Arrest Diversion represents the first intercept<sup>1</sup> with the criminal justice system, making it a prime opportunity to redirect adults with mental health conditions (MHCs) and substance use disorders (SUDs) from jails and connect them with community-based service providers.

- Pre-arrest diversion programs have successfully engaged many adults, with one program serving over 1,000 participants over a 4-year period.<sup>2</sup>
- Programs designed specifically for adults with severe SUDs have served fewer participants, but these programs have high engagement, referral, and retention rates.<sup>3,4,5,6,7,8</sup>

## 2. The majority of adults booked into local jails require mental health services and treatment for SUDs, which are typically not provided in local facilities.

- Two-thirds of sentenced jail inmates met DSM-IV criteria for substance dependence and 44% were classified with a MHC.<sup>9,10</sup>
- Estimates that suggest more than two thirds of the jail population who met criteria for SUDs or MHCs did not receive any treatment or counseling service while incarcerated.<sup>11</sup>

## 3. Behavioral health conditions are associated with repeat criminal justice contact with SUDs being the strongest predictor of jail readmission.

- Adults who met DSM-5 criteria for moderate-to-severe SUD were 2.5 times as likely to experience multiple jail readmissions compared to adults who did not meet similar criteria.<sup>12</sup>





#### 4. Pre-arrest diversion programs assess and address behavioral health needs associated with continual involvement in the criminal justice system.

- Behavioral health assessment of participants in the Adult Civil Citation program indicated symptoms of SUD and greater behavioral problems were associated with arrest following program participation.<sup>13</sup>
- Results from the ANGEL program demonstrate a high (94.5%) direct referral-to-treatment rate for participants with opioid use disorder, which is higher than emergency department-based initiatives.<sup>14</sup>

#### 5. Preliminary results indicate participants who fully engage in pre-arrest diversion programs tend to have low rates of recidivism for extended periods of time.

- LEAD participants who entered the program between 2011–2014 experienced 58% lower odds of rearrest during this time frame.<sup>15</sup>
- Adult Civil Citation participants who successfully completed the program were significantly less likely to be rearrested (9% vs. 59%) within three years compared to those who did not complete the program.<sup>16</sup>
- Participants in the Eau Claire County Pre-Charge Diversion Program were significantly less likely to be rearrested (21% vs. 39%) within two years of program completion compared to adults in a control group.<sup>17</sup>

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