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Diversion, Deflection, and Reentry Programs in Washtenaw County

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According to a 2017 report by the U.S. Department of Justice, the 2011-12 National Inmate Survey showed that 44 percent of jail inmates were told by a mental health professional at some point in their lives that they had a mental health disorder.¹ More recent local data from the Washtenaw County jail shows that 20 percent of individuals screened positive for serious mental illness and 25 percent screened positive for substance use disorders.² Despite the high prevalence of mental health disorders in the jail population, jails are not equipped with appropriate resources to adequately meet inmates' mental health needs.³ In fact, both jails and holding cells have been known to exacerbate mental health conditions through discriminatory practices, implicit bias, overcrowding, and exposure to hostile environments, which may lead to poorer health and mental health outcomes. These outcomes may be severe for those who are incarcerated, and even more severe for racial and ethnic minorities.^{4,5}

Local jails are one of the largest public safety expenditures in the United States.⁶ In 2015, Michigan jails had a total population of 43,375 and spent \$35,809 per inmate on average.⁷ Jails use resources that could be directed toward enhancing community mental health systems that work to prevent acute mental health crises, treat people with substance use disorder, and provide other supportive services like connections to housing assistance.⁸

Improving public safety with scarce community resources

“As policymakers focus on justice reform at the local level and consider how to spend scarce community resources effectively to improve public safety outcomes, they need to understand how much communities are spending to support jails and their operations. With this knowledge, in addition to the growing evidence base about which criminal justice practices work, local leaders can make better decisions about how and when to use jails and determine whether those dollars could be invested more effectively.”

– Christian Henrichson, Joshua Rinaldi, Ruth Delaney, Vera Institute of Justice

¹ Jennifer Bronson and Marcus Berzofsky, “Indicators of Mental Health Problems Reported by Prisoners and Jail Inmates, 2011-12” (U.S. Department of Justice Office of Justice Programs Bureau of Justice Statistics, June 2017), <https://bjs.ojp.gov/content/pub/pdf/imhprpji1112.pdf>.

² Aaron Sukanuma, Washtenaw County Jail Residents' Mental Health Conditions, August 2023.

³ Leah A. Jacobs and Sequoia N. J. Giordano, “It’s Not Like Therapy’: Patient-Inmate Perspectives on Jail Psychiatric Services,” *Administration and Policy in Mental Health and Mental Health Services Research* 45, no. 2 (March 1, 2018): 265–75, <https://doi.org/10.1007/s10488-017-0821-2>.

⁴ Timothy G. Edgemon and Jody Clay-Warner, “Inmate Mental Health and the Pains of Imprisonment,” *Society and Mental Health* 9, no. 1 (March 1, 2019): 33–50, <https://doi.org/10.1177/2156869318785424>.

⁵ Renne Rodriguez Dragomir and Eman Tadros, “Exploring the Impacts of Racial Disparity Within the American Juvenile Justice System,” *Juvenile and Family Court Journal* 71, no. 2 (2020): 61–73, <https://doi.org/10.1111/jfcj.12165>.

⁶ Christian Henrichson, Joshua Rinaldi, and Ruth Delaney, “Measuring the Taxpayer Cost of Local Incarceration” (New York: Vera Institute of Justice, May 2015), <https://www.safetyandjusticechallenge.org/wp-content/uploads/2015/05/The-Price-of-Jails-report.pdf>.

⁷ Chris Mai and Ram Subramanian, “The Price of Prisons-Prison Spending in 2015,” Vera Institute of Justice, May 2017, <https://www.vera.org/publications/price-of-prisons-2015-state-spending-trends/price-of-prisons-2015-state-spending-trends-prison-spending>.

⁸ Henrichson, Rinaldi, and Delaney, “Measuring the Taxpayer Cost of Local Incarceration.”

Fortunately, criminal justice reform approaches can serve as alternatives to traditional incarceration and direct individuals to services that can address mental health issues.

Three reform approaches, 1) diversion, 2) deflection, and 3) reentry, have emerged as promising solutions to reduce overcrowding in jails, address systemic bias, reduce recidivism, and save taxpayer dollars:

1. **Diversion programs** redirect those involved with law enforcement to community-based social services like mental healthcare, substance use disorder treatment, and housing and employment assistance.
2. **Deflection programs** route those at risk of formal contact with law enforcement instead into community-based social services.
3. **Reentry programs** provide individuals in jail with the help they need to return to the community.

Across the nation, these programs are transforming local communities.

Deflection

Deflection programs create “off-ramps” to [divert individuals away from traditional criminal justice system](#) interventions and toward alternative interventions that address the underlying causes of problematic behavior.⁹ Deflection programs work after individuals have made contact with police officers, but before they are criminally charged. In place of punishment, deflection programs offer needed support and resources to individuals, such as mental health or substance use treatment, counseling, education, or social engagement opportunities. By addressing the root causes of individuals’ actions, these programs seek to reduce the likelihood of offending in the future.

Nationally, one of the first and most notable diversion programs is Law Enforcement Assisted Diversion (LEAD), based in King County, Washington. An [evaluation](#) of LEAD showed that participation reduced the rates of re-arrest by 58% while saving the justice system \$8,000 per participant per year.¹⁰ Another national example of diversion and deflection programs is the Criminal Mental Health Project in Miami-Dade County, which [significantly decreased jail bookings and reduced the jail population](#), resulting in an estimated savings to taxpayers of \$12 million per year.¹¹

Diversion

Diversion strategies are designed for individuals who come into formal contact with the criminal justice system, but have not been charged with an offense, and who have underlying social needs such as unaddressed trauma, mental health disorders, substance use disorders, or intellectual disabilities.¹² The diversion framework operates from the understanding that if these and other social needs are met, people are less likely to engage in criminality or delinquency.

⁹ Jac A Charlier and Jessica Reichert, “Introduction: Deflection—Police-Led Responses to Behavioral Health Challenges,” *Journal for Advancing Justice* Volume 3 (January 15, 2021): 1–13.

¹⁰ Susan E. Collins, Heather S. Lonczak, and Seema L. Clifasefi, “Seattle’s Law Enforcement Assisted Diversion (LEAD): Program Effects on Criminal Justice and Legal System Utilization and Costs,” *Journal of Experimental Criminology* 15, no. 2 (June 2019): 201–11, <https://doi.org/10.1007/s11292-019-09352-7>.

¹¹ Steve Leifman and Tim Coffey, “Jail Diversion: The Miami Model,” *CNS Spectrums* 25, no. 5 (October 2020): 659–66, <https://doi.org/10.1017/S1092852920000127>.

¹² Charlier and Reichert.

Diversion programs take various forms. Individuals can [enter diversion programs](#) by self-referral, through contact with a police officer, or after a mental health crisis. Once engaged in the programs, they receive a wide range of services like connections to psychiatric care, access to transitional housing, and case management services.¹³

Reentry

Reentry programs support incarcerated individuals who are transitioning from incarceration back into the community. A 2021 [report](#) from the Bureau of Justice Statistics found that in 2008, 66 percent of people released from state prisons were arrested within three years.¹⁴

[Reentry programs](#) aim to reduce rearrest rates and impact multiple social domains, including employment, physical and behavioral health services, education, and housing services. For example, reentry programs may offer screenings to identify needs when an individual first arrives in the jail, behavioral health care while individuals are in the jail, and administrative support to help an individual prepare to leave the jail, such as acquiring vital documents needed for future employment, and connections to healthcare providers.¹⁵

There is no clear consensus on how to structure reentry programs to ensure individuals' successful reintegration into society. One [study](#) evaluated the Serious and Violent Offender Reentry Initiative (SVORI) program across multiple states and found that participation was linked to longer time to arrest and fewer arrests after release from incarceration for adult participants. Additionally, there was a reduction of \$3,567 in arrest-related costs for men who participated. Evaluations of national reentry programs, including SVORI and the Second Chance Act (SCA), found that men and women benefit from different approaches. Men responded well to anger management and positive relationship building, while women benefited more from practical services, like completing a needs assessment, receiving pre-release employment services, and having a reentry case manager. Although neither program resulted in a decrease in reincarceration rates, both were effective in extending the time between arrests and connecting participants to additional resources.¹⁶ More research is needed to establish a stronger evidence base for reentry programs and provide clear guidance on how best to structure them to meet the needs of participants.

While more research is needed to determine the best structure for reentry programs, evidence suggests that the type of reentry plans and programs that Washtenaw County employs, like helping people get access to vital documents, health insurance, and connection to housing, help prevent people from being re-arrested.¹⁷

Below we describe some of the benefits of diversion, deflection, and reentry programs by looking at the experience in Washtenaw County, a midsized county in Southeast Michigan that generates funds for safety and mental health services through an eight-year public safety preservation and mental health millage, set to expire in 2026.

¹³ Melissa M. Labriola et al., "A Multi-Site Evaluation of Law Enforcement Deflection in the United States" (RAND Corporation, January 10, 2023), https://www.rand.org/pubs/research_reports/RRA2491-1.html.

¹⁴ Leonardo Antenangeli and Matthew Durose, "Recidivism of Prisoners Released in 24 States in 2008: A 10-Year Follow-Up Period (2008–2018)" (U.S. Department of Justice Office of Justice Programs Bureau of Justice Statistics, September 2021), <https://bjs.ojp.gov/library/publications/recidivism-prisoners-released-24-states-2008-10-year-follow-period-2008-2018>.

¹⁵ U.S. Department of Justice Office of Justice Programs, "Reentry Special Feature," Office of Justice Programs, August 13, 2020, <https://www.ojp.gov/feature/reentry/overview>.

¹⁶ Pamela K Lattimore et al., "Prisoner Reentry Services: What Worked for SVORI Evaluation Participants?," February 2012; Ronald D'Amico and Hui Kim, "Evaluation of Seven Second Chance Act Adult Demonstration Programs: Impact Findings at 30 Months," March 2018.

¹⁷ Lucius Couloute, "Nowhere to Go: Homelessness among Formerly Incarcerated People," August 2018, <https://www.prisonpolicy.org/reports/housing.html>; Leifman and Coffey, "Jail Diversion."

Washtenaw County diversion and deflection programs

Diversion and deflection programs are [complementary practices](#) of Washtenaw County’s systems reform approach to criminal justice programming, intended to direct individuals away from charges or incarceration and into necessary care, such as mental health and substance use treatment programs.¹⁸

The Washtenaw County Sheriff’s Office (WCSO) diversion and deflection programs use a systems approach to prevent people with behavioral health needs from entering jail when it is not the most appropriate setting to address their needs. The WCSO uses the Substance Abuse and Mental Health Services Administration’s (SAMHSA) Sequential Intercept model¹⁹ to identify how people with mental health and substance use concerns interact with the justice system and opportunities to divert them into more appropriate care. The Sequential Intercept model is a mapping process that identifies six points in a community system where traditional criminal justice proceedings can be met with community-based care. Those traditional six points are:

- Point zero: prevention through community services,
- Point one: law enforcement and emergency services,
- Point two: hearings and detentions,
- Point three: jails and courts,
- Point four: reentry from jails, and
- Point five: community corrections.

Each point provides an opportunity to improve cross-system collaborations, reduce involvement in the justice system by people with mental and substance use disorders, and enhance reformative justice.

Locally, the WCSO and community-based substance abuse treatment and support services partners influence community safety and wellness at all points. In this case study, we present examples at three points of the intercept model: prevention through community services; law enforcement and emergency services, and reentry from jails.

- **Preventing retaliatory violence.** [WeL.I.V.E](#) is a violence prevention program.²⁰ Victims of traumatic violence like gunshots and stabbings are significantly [more likely](#) to engage in violence against others, often in retaliation for their injury.²¹ This retaliation puts them on a path to future incarceration. In the WeL.I.V.E program, trained violence intervention specialists and outreach workers engage young adults who are victims of a trauma injury when they are in the hospital and then connect them with supportive services such as safe housing and employment opportunities. These services aim to give people pathways to success and a positive outlet to heal after a traumatic experience to prevent future involvement with the criminal justice system. Hospital and community-based violence intervention programs are [highly effective](#) in preventing new and retaliatory violence and helping victims with mental illness.²²

¹⁸ Center for Health & Justice at TASC, NORC at the University of Chicago, and BJA’s Comprehensive Opioid, Stimulant, and Substance Abuse Program, “Report to the National Survey to Assess First Responder Deflection Programs in Response to the Opioid Crisis,” May 13, 2021, https://www.cossup.org/Content/Documents/Articles/CHJ-TASC_Nation_Survey_Report.pdf.

¹⁹ Substance Abuse and Mental Health Services Administration, “The Sequential Intercept Model (SIM),” Criminal and Juvenile Justice, June 29, 2020, <https://www.samhsa.gov/criminal-juvenile-justice/sim-overview>.

²⁰ WeL.I.V.E., “Washtenaw Embraces Life Is Valuable Everyday Violence Intervention and Prevention,” 2022, <https://www.washtenaw.org/DocumentCenter/View/24323/3WeLIVE-Overview-4?bidId=>.

²¹ Cure Violence Global, “The Evidence of Effectiveness,” August 2021, <https://cvg.org/wp-content/uploads/2022/09/Cure-Violence-Evidence-Summary.pdf>.

²² National Network of Hospital-based Violence Intervention, “Hospital-Based Violence Intervention: Practices and Policies to End the Cycle of Violence,” March 2019, <https://static1.squarespace.com/static/5d6f61730a2b610001135b79/t/5d83c0d9056f4d4cbdb9acd9/1568915699707/NNHVIP+White+Paper.pdf>.

- **Connecting individuals to community services as an alternative to arrest.** A new pilot initiative launching in Ypsilanti Township, [Law Enforcement Assisted Diversion and Deflection \(LEADD\)](#), gives officers alternatives to citation, arrest, and incarceration to address problem behavior. Operating as a pre-arrest diversion program, officers in the WCSO LEADD program help connect individuals suspected of low-level criminal offenses to specially trained community-based case managers. Once connected, LEADD case managers use a harm reduction framework to help participants access resources and support. As of July 2023, the LEADD pilot has had 56 referrals since it began in October 2021. Those referred to LEADD were assessed to see if they met the program criteria. Of those referred, 17 qualified individuals met criteria and had prior law enforcement interactions such as trespassing, panhandling, disorderly conduct, and other low-risk, low-level offenses. An early evaluation of LEADD shows positive outcomes from the program: WCSO deputies report that the LEADD program gives them a starting point to connect people with needed resources, and that participants engaged in case management are starting to engage less frequently with the criminal justice system.
- **Provide substance abuse treatment and community supervision.** Washtenaw County courts can divert individuals to the Community Corrections department instead of sending them to jail, a model known as Alternatives to Incarceration. The Community Corrections department provides supervision, monitoring, and can help facilitate substance abuse treatment. A correctional services counselor will meet with the court-ordered individual and facilitate the contact and release to Dawn Farm, the court-approved substance abuse treatment center for Washtenaw County. Participants can receive various treatments and support, including long-term residential care, transitional housing, detox and stabilization, and outpatient care. Individuals who are receiving psychiatric services in jail can be referred to the Community Corrections department rather than proceed to prosecution upon court approval.

Washtenaw County reentry programs

Point four of the SAMHSA Sequential Intercept Model identifies programs that support individuals before release from jail or after reentering the community. The Washtenaw County Jail is equipped with a team dedicated to providing reentry support for inmates. The team includes two case managers, two peer support specialists, and a reentry coordinator.

The team uses a risk and needs screening tool to identify health and social needs before they are released from jail. With needs identified, they provide case management services, counseling and substance use treatment. In addition, staff help inmates establish a detailed and thoughtful reentry plan as their release date approaches.

In 2022, the team provided over 2,000 services, helping hundreds of individuals re-enter the community.

Once an individual is released, the team provides community-based case management and up to 12 months of follow-up services, such as helping individuals secure jobs and obtain transportation. Screenings, services, reentry plans, and ongoing community-based support work to reduce re-arrest rates. Ultimately, follow-up services serve as a liaison between psychosocial support in the jail and resources in the community.

Towards sustainability: using local solutions to fill gaps in funding.

Across the nation, there is growing recognition of the importance and effectiveness of diversion, deflection, and reentry programs. However, while these initiatives can sometimes save taxpayers money, local entities often face

funding shortages when trying to implement them.²³ Washtenaw County faces similar funding challenges, which was part of the impetus for residents to approve an eight-year millage in 2017. This millage taxes county residents to establish and fund programs that enhance public safety and prioritize mental health support. Known as the Public Safety and Mental Health Preservation Millage, this funding source is pivotal in funding various diversion and deflection programs within the county. Additionally, it has enabled the county to pursue and secure federal grants to bolster its reentry program. Without this local funding source, the county would be limited in its ability to assist a wide range of residents, explore innovative solutions like LEADD, and ultimately preserve public safety.

Investing in justice: The future of law enforcement

Diversion, deflection, and reentry programs aim to stop the cycle of criminal justice involvement and prevent incarceration for those such systems may not appropriately serve. These programs have developed and gained popularity over the past 12 years in response to increasing mental health and substance use needs in the United States.²⁴

The Washtenaw County Deflection, Diversion, and Reentry programming highlights the county's dedication to identifying and implementing programs that meet the needs of justice-involved individuals and supports compassionate police reform. The DDR framework stands as a testament to WCSO's dedication to build a safer and more just community for all, where the system gives individuals opportunities to turn their lives around and positively reintegrate in society. The programs adopt a preventive and alternative approach to criminal justice involvement. It provides opportunities for the department to address the underlying factors that lead to criminal behavior—such as unemployment, substance use, and poverty—rather than focusing on punishment. Together, WCSO's DDR initiatives foster a local justice system dedicated to trauma-informed harm reduction programming.

WCSO's transformative approach may be an inspiring example for other law enforcement agencies seeking to create a more effective and humane criminal justice system.

²³ Cora L. Bernard et al., "Health Outcomes and Cost-Effectiveness of Diversion Programs for Low-Level Drug Offenders: A Model-Based Analysis," *PLoS Medicine* 17, no. 10 (October 2020): e1003239, <https://doi.org/10.1371/journal.pmed.1003239>; National Conference of State Legislatures, "Successful Reentry: Exploring Funding Models to Support Rehabilitation, Reduce Recidivism," June 21, 2023, <https://www.ncsl.org/civil-and-criminal-justice/the-importance-of-funding-reentry-programs>.

²⁴ Center for Health & Justice at TASC, NORC at the University of Chicago, and BJA's Comprehensive Opioid, Stimulant, and Substance Abuse Program, "Report to the National Survey to Assess First Responder Deflection Programs in Response to the Opioid Crisis."