

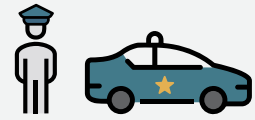
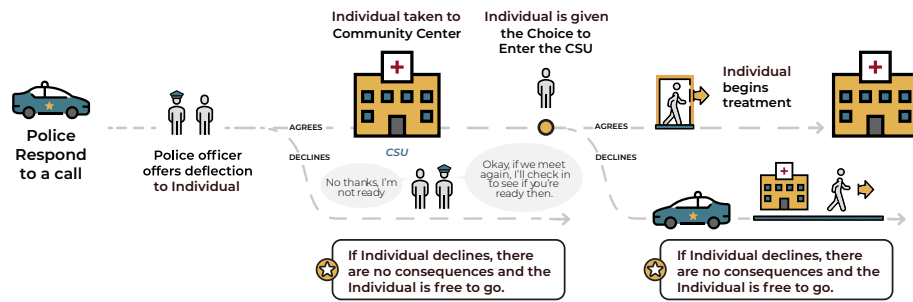
03

Unpacking

Treatment Initiation & Engagement

INITIATING AND ENGAGING WITH THE TREATMENT OPEN DOOR

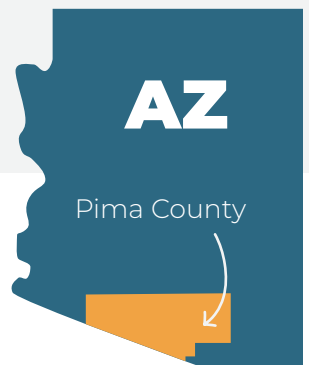
Improving public safety can take many shapes. One important way police can directly improve public safety is by **prioritizing access to community-based treatment** for historically excluded groups instead of taking them to **jail where they receive no or limited treatment** services.



The **spirit** of police-led deflection programs provides an opportunity for police to connect an individual to treatment rather than arresting them. Importantly, a deflection away from jail and into treatment means there is **no threat of legal punishment**.

At first, it might seem as though replacing the criminal legal system revolving door with a treatment open door does not solve the root concern for behavior requiring police involvement. However, for many individuals with recurring mental health symptomology and drug use, **the same old response of jail does not provide the care they need**. A treatment open door, instead, can provide even **small amounts of direct service and targeted care** to individuals overtime.

As police departments implement deflection programs, it is important to understand that **individuals may need many opportunities to initiate treatment** before they fully engage. Emerging research says there are several **complex reasons individuals do not enroll** in treatment or remain engaged.



TREATMENT INITIATION AND ENGAGEMENT IN PIMA COUNTY, AZ

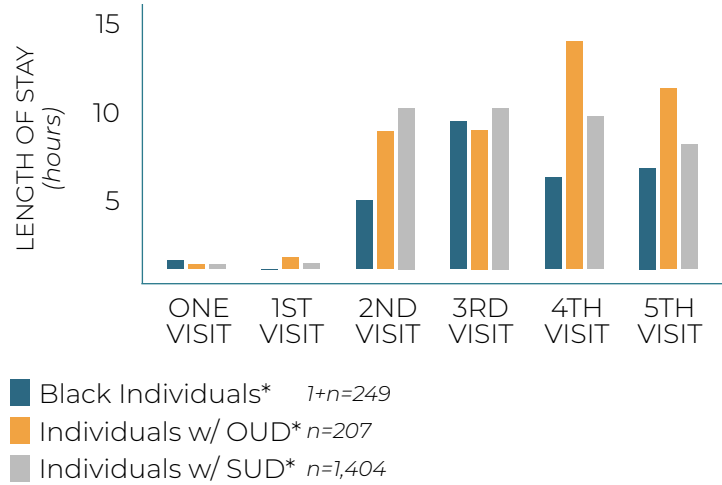
In 2011, **Pima County, Arizona** built the **Crisis Response Center (CRC)**, an example of a CSU, as an alternative to sending people experiencing a behavioral health crisis to jail or emergency rooms. The CRC uses a **“no wrong door”** and **accepts any person for nearly any reason** and regularly accept individuals brought to them by police (known as a deflection to the CRC). In JSP’s study of **police-led deflection to the CRC**, police spoke to researchers about **the process of deflecting an individual and why policy encourages them to deflect individuals** as many times as necessary.

03. Treatment Initiation and Engagement

INDIVIDUALS DEFLECTED TO THE CRISIS RESOURCE CENTER

multiple times remained engaged longer each visit. This was especially true for Black individuals with severe mental health disorders; individuals with co-occurring substance use disorder (SUD) and SMHD; or, individuals with co-occurring Opioid Use Disorder (OUD) specifically and SMHD.

LENGTH OF STAY (LOS) BY NUMBER OF VISITS



Officers involved with the police-led deflection program in Pima County, Arizona comment that **people often show hesitancy to accept a treatment option** – even when they know it's instead of an arrest. Officers in Pima County describe in detail for researchers reasons residents often **decline a deflection.**

They explain that some individuals:



Have had previous experiences with victimization at treatment facilities and are concerned it may happen again.



Are fearful of withdrawal symptoms or have experienced shame from previous exposure to treatment and fear they will struggle, again.



Describe anxiety about leaving their property or animals behind, particularly particularly if they are experiencing homelessness.



Express issues about fees and insurance or programmatic rules like chores, no smoking, and no visitors.

It doesn't matter if I've offered it to him before, I can offer it again. That's important because we've learned it takes something like upwards of 14 tries before someone agrees and commits to getting clean. I know I'll see him again next week, and I'll offer it again.

CONNECTING DECLINES FOR TREATMENT WITH POLICE-LED DEFLECTION POLICIES

Although Pima County police provide many complex reasons individuals decline deflections and access to services, they did not discuss the intersection of race, gender, and disability and how it can impact an individual's readiness to initiate and engage in treatment.

Experiences with racism, cis-sexism, heterosexism, ablism and stigma while engaged in previous treatment programs might also explain why an individual may not want to engage with the treatment options offered by an officer. This is an important point that officers must consider when they are working with residents in the field about accepting a deflection to a provider.

03. Treatment Initiation and Engagement

Importantly, these reasons are not mutually exclusive...

People may consider **several of the concerns** described by Pima County officers at any one time when approached by police for deflection. Given the complexity of these reasons, it is important police officers and their departments don't confuse **declining a deflection** with strict ideas of **"a lack of willingness to go to treatment."** It is far more **complicated** than simply **willingness** to go.

Evidenced by Pima County's data, **continuously** offering individuals the option of going to treatment every time there is police contact helps get them in the treatment open door and **increases their engagement in treatment over time.**

Further, police must **reconsider the use of arrest at all where deflection is otherwise available.** As described by officers in Pima and offered across research, treatment initiation is complex and declining treatment is **not necessarily about willingness** or not wanting to change. One way police departments can improve their knowledge of these issues is through varied trainings such as:



Adverse Childhood Events (ACE)



Withdrawal and Symptomatology Training



Trauma-Informed Care training

Importantly, police policies should also explicitly state that **declining deflection will not result in arrest.** This policy component may have important implications on many groups, but particularly **Black, Brown, Indigenous, gay, trans-, disabled people** – many of whom who may decline treatment to avoid repeat exposure to discrimination.

As police agencies continue to adopt police-led deflection, it is important their policies do not punish the complex reasons people do not want to start treatment. Deflection policies must:

- *Prioritize deflection over arrest.*
- *De-emphasize arrest and/or eliminate arrest once deflection is offered.*
- *Ensure unlimited deflections.*

This document was created with support from the John D. and Catherine T. MacArthur Foundation as part of the Safety and Justice Challenge, which seeks to reduce over incarceration by changing the way America thinks about and uses jails.



Police agencies using deflection policies must also adopt policies that allow officers to deflect individuals an

UNLIMITED NUMBER OF TIMES.

LEARN MORE

about the impacts of police-led deflection strategies on jail reduction efforts

WE BLOGGED ABOUT IT

