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An Analysis of the Use of Transformational Relationships in the Atlanta/Fulton County

Pre-Arrest Diversion (PAD) Initiative: A Process Evaluation

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2017

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Abstract

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By Nicole M. Baker

Traditional criminal prosecution is an inefficient, time-consuming, and expensive response to the commission of low-level crimes as the consequences of arrest make it significantly more difficult to survive without reoffending. The Atlanta Fulton County Pre-Arrest Diversion Initiative (PAD) partners with the Atlanta Police Department (APD) in an innovative approach to addressing crimes stemming from poverty, problematic substance use, and mental illness. This evaluation focuses on the way the interactions, contributions, perceptions, and priorities of different stakeholders, individually and as a collective group, bolster or hinder the achievement of program aims. Using open-ended questions to guide conversation, semi-structured interviews inquired about stakeholders' perspectives on PAD in general, aspects of their roles in PAD including challenges and priorities, and specifically affective & cognitive stakeholder buy-in. Though each stakeholder expressed investment in PAD's success some way or another, due to the specific mission of each partner, priorities have already differed in the past and eventually will conflict again in the future. Adhering to a specific, mutually agreed upon set of guiding principles allows for stakeholders to hold each-other accountable through program implementation, inform stakeholder's prioritization, and ensure activities remain centered on achieving PAD outcomes, not individual stakeholder priorities. The Atlanta/Fulton County Pre-Arrest Diversion Initiative has demonstrated success in positively transforming relationships across stakeholder organizations, paving the way for alignment in their vision to improving public safety through towards utilizing rehabilitation through services instead of retribution through incarceration.

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Won't He Do It.

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Operational Definitions

APD – Atlanta Police Department

Beat Officer – A police officer who walks, rides, cycles, or drives in a specific neighborhood, known as a “beat”

Buy-In – Agreement to support a decision or outcome

- Affective Buy-In: Buy-in based on emotional feeling
- Cognitive Buy-In: Buy-in based on perceived reality

CBPR – Community Based Participatory Research

CoC - Continuum of Care

Harm Reduction – Set of practical strategies and ideas aimed at reducing negative consequences associated with drug use

LEAD – Law Enforcement Assisted Diversion

NAMI – National Alliance on Mental Illness

Midtown Residents – Focus group participant(s), excluding individuals considered as part of PAD target population

MoU – Memorandum of Understanding

PAD – Atlanta/Fulton County Pre-Arrest Diversion Initiative

Pre-Arrest – Intervention occurs at time of encounter, before arrest

Pre-Booking – Offenders are diverted following arrest and prior to charges and incarceration

Pre-Trial – Offenders are diverted after booking, usually at the pre-charge stage

Pimp – An individual who controls prostitutes and arranges clients for them, taking part of their earnings in return

John – A sex worker’s client

Readiness to Change – *Stages of Change* model describes five stages of readiness (precontemplation, contemplation, preparation, action, and maintenance) as a framework for understanding behavior change

“Stick-and-Carrot” – Use of a combination of reward and punishment to induce a desired behavior

Stakeholder – A stakeholder is a member of a "group without whose support the organization would cease to exist" as intended

Chapter 1. Introduction & Background

Statement of Need

Home to 10,519,475⁽¹⁾ people, the state of Georgia currently ranks 9th in the country in the number of individuals incarcerated in state prisons with 517 per 100,000 residents, even higher than the national rate of 471 per 100,000 residents⁽²⁾. Fulton County, which encompasses the city of Atlanta, is the most populated county in the state with 1,041,423 residents as of 2017⁽¹⁾, yet also maintains the greatest income inequality in the country with Atlanta topping the list among the 50 largest cities in the United States⁽³⁾. This income inequality has been a driving force behind high rates of poverty-related crimes such as prostitution, untreated mental illness, and pervasive substance abuse in the face of incarceration being utilized in the place of behavioral health interventions⁽⁴⁾.

Traditional criminal prosecution is an inefficient, time-consuming, and expensive response to the commission of low-level crimes as the consequences of arrest make it significantly more difficult to survive without reoffending. A study conducted by the Brennan Center for Justice found in an examination of data on about 1.5 million prisoners nationwide that for 25% of the individuals, an alternative sentence such as substance abuse treatment or service to the community would be more cost-efficient and effective in reducing crime and another 14% had already served a sentence proportionate to the magnitude of their crime, combining to make up 39% of the prison population currently incarcerated without any real contribution to improving public safety⁽⁵⁾. This is relatively unsurprising considering the lack of research informing decades of state and federal sentencing policies, resulting in today's inequitable and expensive criminal justice system⁽⁶⁾. These undue costs squander funding that could contribute to the strengthening of the education system. For example, the savings in switching to behavioral

health services instead of detention could pay for a year of college for an in-state student, according to NAMI, as keeping an inmate with mental illness in jail costs \$31,000 annually, while community mental health services cost about \$10,000⁽⁷⁾. As the political climate shifts and citizens increasingly demand transparency, accountability, and reform within the criminal justice system, now is a critical time for designing, implementing, and evaluating collaborative evidence-based solutions to improving the safety of communities and resident quality of life.

[Atlanta/Fulton County Pre-Arrest Diversion \(PAD\) Initiative Overview](#)

Goals & Objectives

The Atlanta Fulton County Pre-Arrest Diversion Initiative (PAD) partners with the Atlanta Police Department (APD) in an innovative approach to addressing crimes stemming from poverty, problematic substance use, and mental illness. The program supports action towards rethinking arrest as a solution to societal problems, supporting overall community & individual wellness and improving the quality of life for those most at-risk for arrest by ceasing the continuous cycle of recidivism and removing them from the criminal justice system entirely. By utilizing service provision instead of incarceration, neighborhoods will become safer, community member's quality of life will be improved, and the access to, quality, and quantity of social services available in the city and county will be increased.

According to the PAD Navigation Protocol, program goals aim to:

- **Reduce Criminal Justice System Involvement** for people whose behaviors are related to substance use/misuse, unmet mental health needs, and extreme poverty.
- **Reorient Attitudes and Responses** to disorder, addiction, and mental illness, away from criminalization and toward public health.

- **Improve Participant & Community Quality of Life** through evidence-based, trauma-informed, harm reduction interventions.
- **Strengthen Social Service Infrastructure** for participants and all residents by providing training, connection and partnership to social service providers in Atlanta/Fulton County.
- **Advocate for Reallocation of Criminal Justice Funding** to fund community-based safety and wellness strategies.
- **Shift Culture and Heal Relationships** between communities and police by giving officers new tools and promoting law enforcement practices that demonstrate care, concern, and respect.

Program Design & Implementation

Formative Research

Prior to designing PAD, preliminary research was conducted in potential host communities in coordination with community leadership. This research included:

- Comparing crime data from APD Zones 3, 5, and 6 (Mid- & Downtown Atlanta)
- Interviewing APD and neighborhood leadership to determine Pilot location
- Analyzing APD data related to quality of life, narcotics, and prostitution- related crimes, to determine:
 - Highest frequency calls for service
 - Most common arrest charges
 - Demographics of potential PAD participants

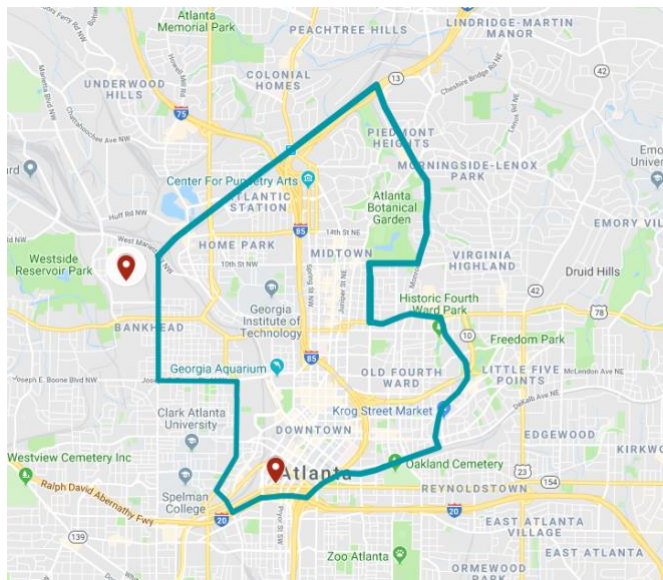


Figure 1. Pre-Arrest Diversion Boundaries

- Reviewing snapshots of Atlanta City Detention Center and Fulton County Jail population charges and analyzing the average days before release
- Reviewing current Atlanta Pre-Trial Interventions, Alternative courts, and Sentencing options
- Interviewing potential participants, Neighborhood Planning Unit (NPU) Leaders, and business owners

PAD Design

I. Service Areas & Schedule

- a. The Atlanta Fulton County PAD Initiative has been piloted in APD Zones 5 in beats 505, 508, 509, 510, 511, 512, and APD Zone 6 in beats 603 and 604.
- b. Pre-Arrest Diversion referrals will be accepted on Tuesday, Wednesday, and Thursday during the hours of 10:00am – 8:00pm, and Friday during the hours of 7:00pm-1:00am Saturday morning.

II. Program Oversight

- a. **Operational Working Group** – The **Operational Working Group** is made up of the Atlanta Police Department, the Fulton County District Attorney’s Office, the City of Atlanta Solicitor’s Office, the Fulton County Solicitor’s office, City of Atlanta Law Department, the City of Atlanta Public Defender’s Office, the Fulton County Public Defender’s Office, and the Atlanta/Fulton County Pre-Arrest Diversion Initiative, the eight PAD implementing agencies. The group makes policy-level decisions regarding the PAD initiative, provide periodic administrative oversight of the program, and uphold the guiding principles of the model, including a commitment to harm reduction. Responsibilities also include reviewing PAD referral and diversion protocols and RFP's for PAD related service provision and evaluation. Implementation oversight is carried out through mechanisms, including but not limited to regular review of reports from the Policy Advisory Committee, contract compliance of service providers and evaluators, ensuring a commitment to a harm reduction philosophy, and solicitation and review of community feedback, and modification of service provision, or evaluation criteria and process, as needed.
- b. **Policy Advisory Committee** – Community stakeholders, policymakers, former PAD participants, and other subject-matter experts comprised the **Policy Advisory Committee**. The committee holds responsibility for reviewing and providing feedback on the referral and diversion protocols for PAD candidates and participating in regularly scheduled meetings with the Operational Working Group. Policy guidance for the PAD program’s operation and evaluation is

provided by the committee. For comparison and evaluative purposes, the group is also responsible for making criminal justice and human services system data available.

- c. **Service Provider Network** – The **Service Provider Network** consists of service providers which have agreements or MOUs with the PAD initiative to cover service provision to PAD participants using a housing first, harm reduction, trauma informed, & culturally competent model.
- d. **Law Enforcement Subcommittee** – Atlanta Police Department and other law enforcement personnel specially trained in PAD intake and referral procedures comprise the **Law Enforcement Subcommittee**. Responsible for reviewing and providing feedback on the Operational Protocol, the subcommittee makes recommendations to the Operational Working Group as PAD is developed and implemented.

III. Program Staffing

- a. **Atlanta/Fulton County Pre-Arrest Diversion Initiative** – An independent non-profit entity that is responsible for the administration and implementation of the Pre-Arrest Diversion program. Staff include the Executive Director, Program Manager, Care Navigation Manager, Care Navigators (Figure 2), & Office Manager.
- b. **PAD Liaison Officers** – Law enforcement officers who are assigned to be points of contact for their agency and work closely with Care Navigators to educate officers on proper procedures, share program successes, and identify challenges they observe.

- c. **PAD-Trained Officers** – Atlanta Police Department officers policing Zones 5 and 6 and other law enforcement personnel specially trained in PAD intake and referral procedures. Personnel receive training on the principles of harm reduction and trauma-informed care and how to apply these principles when dealing with addiction, mental illness, and homelessness, as well as PAD Operational Protocol.
- d. **PAD Partners** – Service providers agreeing to serve PAD participants using a housing first, harm reduction, trauma informed, & culturally competent model.

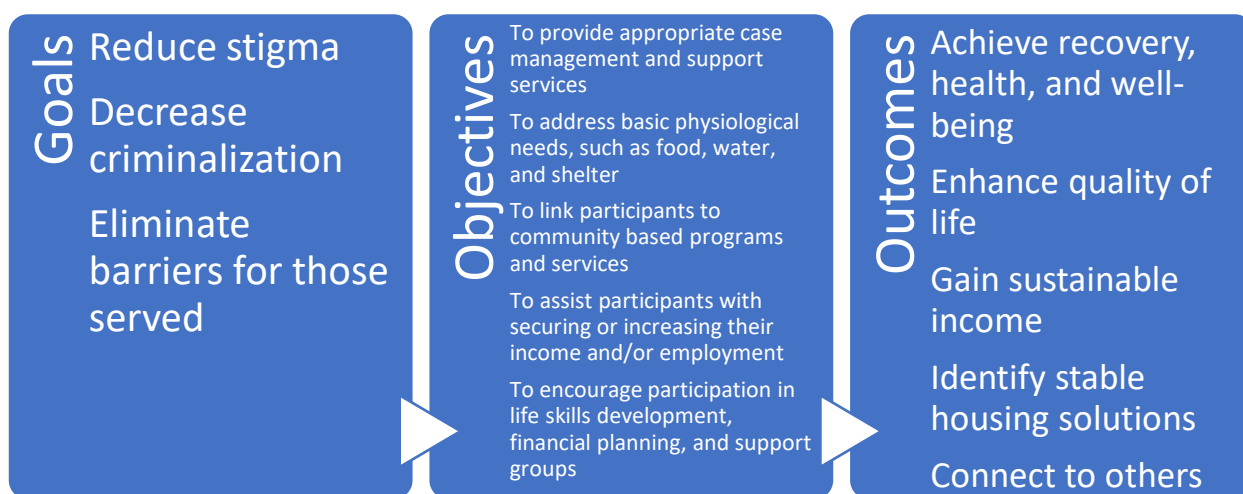


Figure 2. Care Navigation Process (Adapted from PAD Care Navigator Protocol)

The [PAD Criminal Justice System Navigation Protocol](#) details the procedural aspects of the program referral process, differentiating the course of action between new referrals and current participants that are re-arrested.

Theory

The City of Atlanta ("City"), Fulton County ("County"), residents and business owners in the communities want to improve public safety and quality of life in their neighborhoods and

reduce future criminal behavior related to mental illness, drug involvement, extreme poverty and other health and wellness issues in the City's communities. However, booking, prosecuting, and jailing individuals committing offenses related to mental illness, drug involvement, extreme poverty and other health and wellness issues in the City has had limited effectiveness in improving either public safety or quality of life in the neighborhoods and interventions that connect people who have been charged with minor offenses with services that may cost less and be more successful at reducing future criminal behavior than processing these individuals through the criminal justice system. Thus, a program grounded in harm reduction and housing first philosophies, such as pre-arrest diversion (PAD), may provide better results than traditional abstinence-only programs as harm reduction is a proven public health philosophy and intervention that seeks to reduce the harms associated with drug use. The criminal conviction that eventually accompanies an arrest results in a significant hinderance of a person's ability to function as a productive member of society. (Summarized based upon the Atlanta/Fulton County Pre-Arrest Diversion Initiative Memorandum of Understanding)

Context & History

In 2011, Georgia joined the list of states transforming their approach to law enforcement. Resolving to improve public safety, hold offenders accountable, and curb prison spending, the Georgia General Assembly passed and Governor Deal signed HB 265 to create the bipartisan, inter-branch Special Council on Criminal Justice Reform for Georgians⁽⁸⁾. Just two years later, the PAD initiative was developed as a response to the 2013 proposal supported by the Atlanta Police Department and then Mayor Kasim Reed that would have subjected convicted sex workers and their pimps to banishment from certain areas of the city reflecting high rates of sex work and drug offenses. In response, Solutions Not Punishments (SNaPCO) lead grassroots

organizing campaign to defeat the ordinance and instead collaborate with the city to build an alternative, ‘common-sense’ rehabilitative approach. As a result, criminal justice agencies, local governments, neighborhood and faith leaders, and social services providers collaborated to form the two-year Pre-Arrest Diversion pilot. As stated on the initiative’s official website, “the Pre-Arrest Diversion Initiative is a strategy designed by people directly impacted by policing and incarceration, who built a broad grassroots coalition to champion criminal justice reform and propose more effective approaches to public safety.”

PAD Timeline

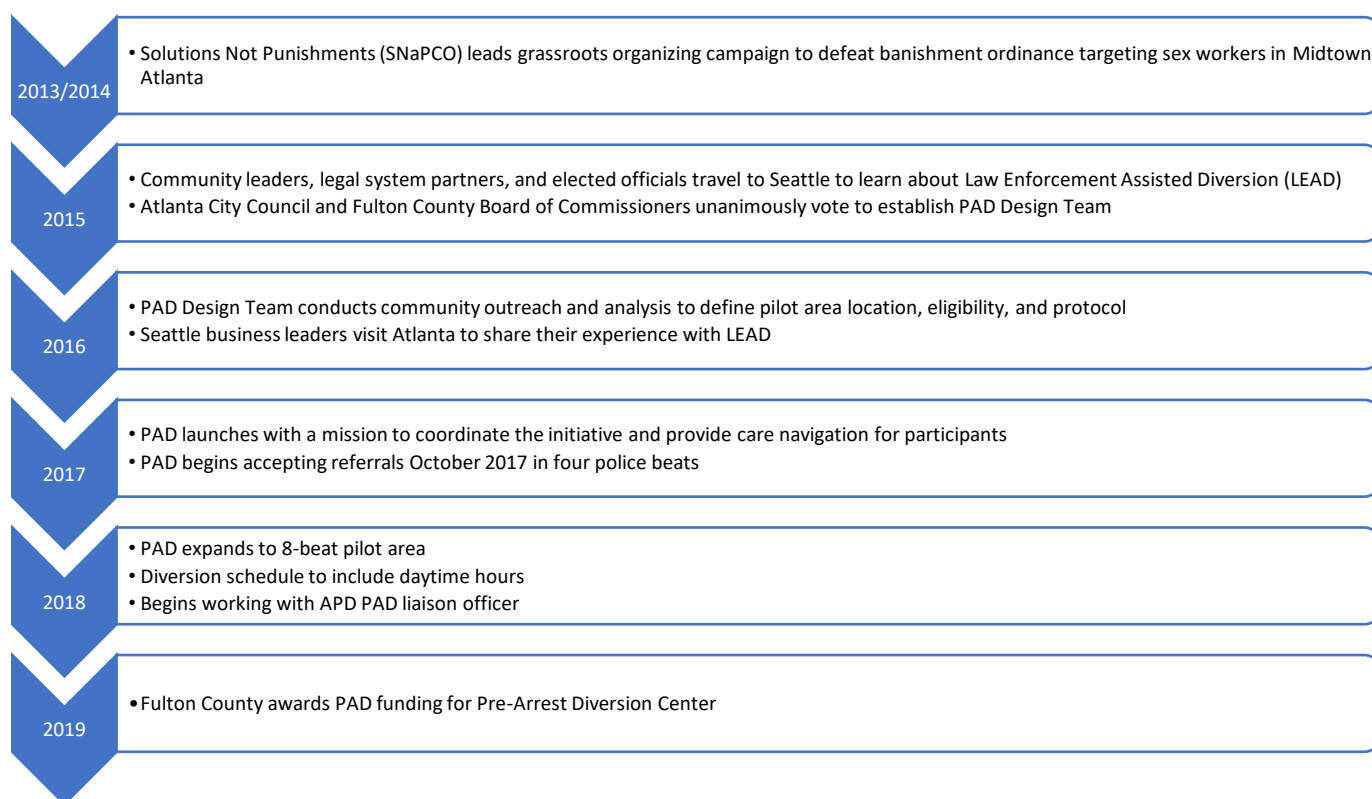


Figure 3. Atlanta/Fulton County Pre-Arrest Diversion Initiative Timeline

Funding & Support

- \$2.2 million funded 2-year pilot
- \$100,000 Fulton County Government

- Justice Reinvestment Initiative: An effort to continue the County’s progress on developing and implementing system-wide reforms with a particular focus on the criminal justice system. (Action Plan)
- LEAD Bureau National Technical Assistance Program offered to provide technical support to the City of Atlanta and Fulton County in the establishment of the pre-arrest diversion initiative (MOU)
- Private foundations have expressed interest in supporting the development and evaluation of pre-arrest diversion in Atlanta (MOU)

Characterization of Target Population

Though created in response to the prosecution of sex work, PAD priority participants include individuals who have had multiple contacts with the criminal legal system and are at high risk of recidivism, those most impacted by racial disparities in policing, arrests and sentencing, & individuals typically excluded from other diversion programs. Generally, the program targets those facing any charge where the illegal activity was connected to an unmet mental health need, substance use disorder, or extreme poverty.

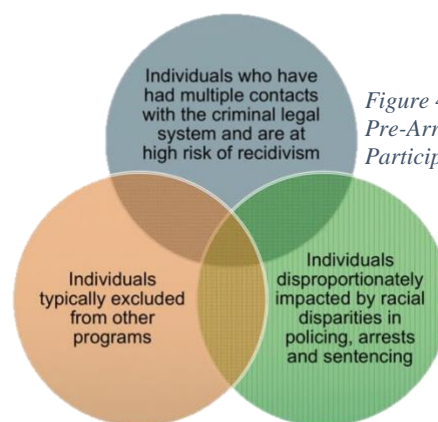


Figure 4. Atlanta/Fulton County Pre-Arrest Diversion Initiative Priority Participants

Individuals are not eligible for pre-arrest diversion if one, or multiple, of the following exclusionary criteria are met at the time of APD encounter:

- Under the age of 17 years old
- Presents a substantial risk of harm to self or others

- Probable cause that the individual committed a violent crime or property crime against a complainant and the complainant objects to diversion
- Has any of the following pending charges:
 - Violent offenses: Murder, felony murder, voluntary manslaughter, kidnapping with bodily injury
 - Sex offenses: Rape, aggravated sodomy, aggravated child molestation, incest
 - Other offenses: Armed robbery, hijacking, home invasion
- Has active exclusionary warrants ([See Section VIII of PAD Operational Protocol](#)).

Mental Health

Annually, nationwide more than two million people with serious mental illness are booked into jails around the country⁽⁹⁾. Though accurate estimates are hard to obtain, the Fulton County Justice Reinvestment Committee reports that at any point in time around 25% of the jail's average daily population (ADP) has a diagnosed mental illness⁽¹⁰⁾. However, in a national survey it was demonstrated that almost two-thirds of those incarcerated (64%) have a mental health issue, 17% have a serious mental illness, and 50% of prison and jail inmates in the US have been diagnosed with a behavioral disorder⁽¹¹⁾. Partially due to a lack of access to crisis intervention services and continuum of care, individuals suffering from untreated mental health and substance abuse disorders are eight times more likely to be incarcerated (12). In gathering data on Fulton County's service to offenders with mental illness, the Fulton County Justice and Mental Health Task Force found that offenders with mental illness spent on average 58 days in jail awaiting trial vs 26 days for those without (12). Not only are costs higher due to extended stays, these individuals also likely utilize a disproportionate share of mental and medical health services. The National Alliance on Mental Illness (NAMI) rejects the use of detention for

individuals who committed an offense stemming from an underlying mental or behavioral health condition as prisons and jails do not represent optimal settings for therapeutic interventions, especially for the 4.17% of adult Georgians affected by a serious mental illness (7,13). Utilizing the traditional criminal justice system for addressing offenses involving mental illness is ineffectual and expensive., only 37.4% of Georgia adults with mental illness utilize mental health services despite increasing per capita spending on personal health care (13).

Homelessness

As of January 2017, the homelessness rate in Fulton County, as measured by a count of sheltered and unsheltered homeless persons, was 388 homeless persons per 100,000 residents(14). Despite the rate of homelessness dropping significantly between 2010 and 2016, Fulton County maintains the highest rate in comparison to benchmark cities(14). The National Alliance to End Homelessness reports that on any given night, across Georgia, around 9,500 individuals are homeless, representing 9 homeless per 10,000 people in general population(15). Fulton County reports 222 people homeless on any given night and 3.8 homeless per 10,000 people in the general population, alarmingly, in Atlanta these numbers spike to 3,076 and 65.1, respectively(15). In examining those who were incarcerated with a mental illness, it was found that they were much more likely to have been homeless at the time of their arrest than those without mental illnesses(16). Individuals experiencing homelessness are particularly exposed to high-levels of interaction with law enforcement due to their visibility and "nuisance" crimes such as panhandling and public intoxication which trigger resident reports. This is evidenced in the most PAD referral update reflecting 62 out of 97 (64%) total diversions stemming from only three charges: criminal trespass (n=27), panhandling (n=21), and urban camping (n=14). Charges related to experiencing homelessness were the most commonly referred to PAD for diversion.

Additionally, housing instability severely inhibits the prospects of avoiding recidivism long-term and achieving successful reentry into the community post-release(16).

Sex Work

Atlanta ,GA is the number one city in the United States, with the highest sex economy income of \$290 million per year(17). A study conducted of 7 major U.S. cities found that only Atlanta and Seattle saw their sex trade increase between the years of 2003 and 2007. Atlanta pimps have been making an average of \$33,000 a week since 2005, far more than pimps in Dallas at \$12,000 a week(17). Though posting online ads for sex is indeed increasing in frequency, Atlanta's street demand for prostitution has remained "very high and extremely profitable"(17). The report speculated that one major factor supporting the trade could be the major highways (I-75, I-85, and I-285) running through the city that brings johns from out of town and the suburbs. In interviews, pimps and sex workers reported many of the same factors as influencing their decision to become involved in the commercial sex trade. Factors that pimps reported included neighborhood/peer influence, prior family exposure to sex work, lack of economic opportunity, and encouragement from a significant other or acquaintance as critical factors in their decision to engage in trading sex. Sex worker respondents explained that they became involved in sex work for similar reasons such as economic necessity, family and peer encouragement, trauma from childhood, and social acceptance and desirability(17).

Substance Abuse & Addiction

Severely punitive drug policies have dramatically increased the number of people arrested, convicted, and incarcerated for drug-related crime. In 2016, Georgia had a drug overdose death rate of 13 deaths per 100,000 people (age-adjusted) and an opioid overdose death rate of 9 per 100,000(13). Two years later in Fulton County 17.8% residents were affected by

excessive drinking(13). The vast majority of drug arrests are for possession, so high levels of substance abuse and addiction are left to dealt with by the criminal justice system. As the U.S. population rose by 12% between 1996 and 2006, the number of incarcerated adults rose by 33% to 2.3 million inmates, and the number of substance-involved inmates shot up by 43% to 1.9 million inmates(18). Around 50% of prison and jail inmates meet DSM-IV criteria for substance abuse or dependence, and high percentages of prisoners reported being under the influence of drugs when they committed the act they are incarcerated for(18). Between 2000 and 2013, the percentage of arrestees with opiates in their system increased, with a couple of cities seeing significant increases in opiate presence, as well as methamphetamines(18). In addition to public safety implications, substance abuse and addiction have other significant public health impacts. The CDC estimates that between 2008 and 2011 7.6% of new HIV diagnoses involved transmission via injection drug use(19). Substance abuse may be compounded by co-occurring mental illness, and many begin to use substances to cope with mental illness or physical pain. Individuals affected by mental illnesses are at increased risk of developing substance use disorders over the course of their lifetimes, and arrests for drug offenses have skyrocketed since 1980(20). Research has found that nearly three-quarters of men and women with mental illnesses in jails also have a co-occurring substance use disorder.

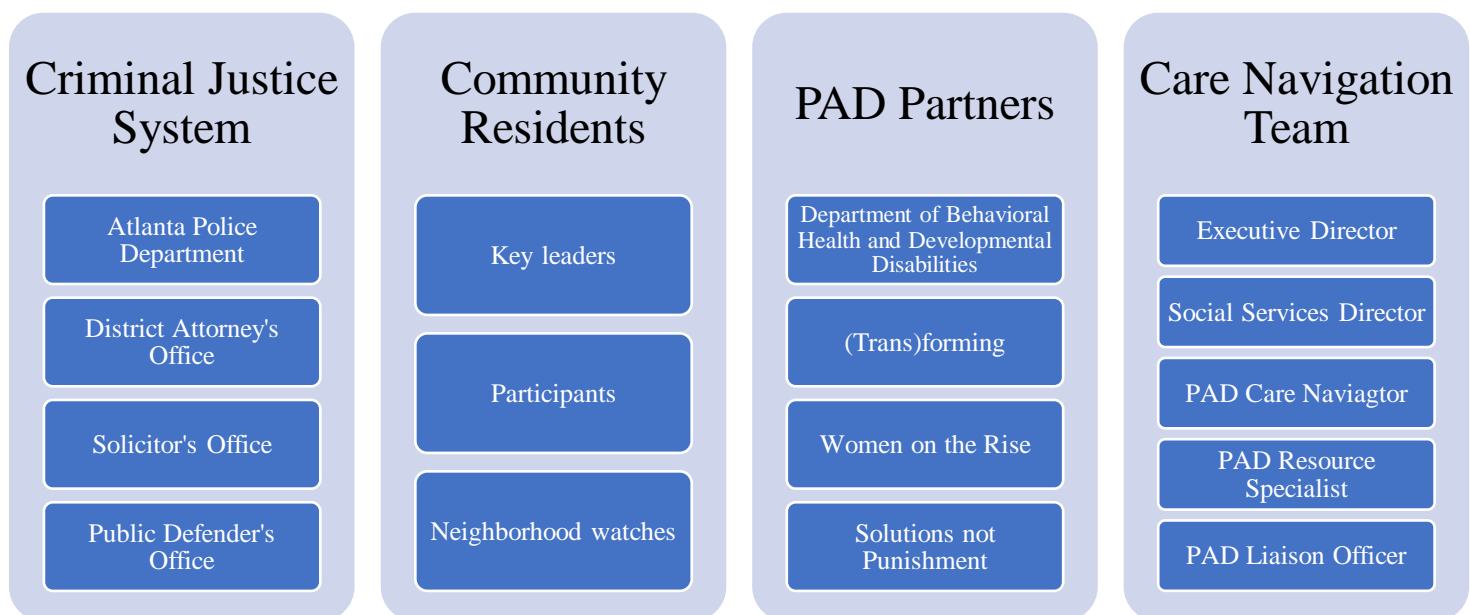
[Characterization of Stakeholders](#)

The effectiveness of PAD is dependent upon its inclusive and diverse partnerships with criminal justice agencies in diverting and removing criminal justice system barriers. Figure 3 is a visual representation of Fulton County criminal justice system and how stakeholders interact or fail to.



Figure 3. Atlanta Fulton County Criminal Justice System 101

The following stakeholder organizations are characterized in the [PAD MoU](#) and the [PAD Criminal Justice System Navigation Protocol](#):



Purpose of Evaluation

This evaluation focuses on the way the interactions, contributions, perceptions, and priorities of different stakeholders, individually and as a collective group, bolster or hinder the achievement of program aims. Due to the nature of PAD being the first and only *pre*-arrest LEAD program, identifying issues as articulated by stakeholders and analyzing the extent to which partnerships affect overall success provides a unique opportunity for researchers planning similar programs to potentially mitigate some of these issues in the design phase. Evaluation is also critical to the informing of stakeholders, government decision makers, and the greater community about the impact of PAD, especially in the context of fulfilling priority need areas(21). Additionally, since this program is only in its pilot phase, PAD staff and stakeholders may have the opportunity to use these findings to propose solutions and make changes leading to improvement going forward.

Chapter 2. Comprehensive Literature Review

Mass Incarceration

Incarceration in the United States

The United States' trend of mass incarceration, as defined by comparatively and historically extreme rates of imprisonment, is unique in the world (22). Though only accounting for 5% of the world's population, with ~2.3 million people currently being held in its jails and prisons, the US incarcerates 20% of the world's prison population(23). At around 5 times higher than the majority of countries, the US incarceration rate is higher than any country in the world (24). Though according to the Pew Research Center, the US incarceration rate is at its lowest in 20 years. Currently, the US employs a system of 1,719 state prisons, 102 federal prisons, 1,852 juvenile correctional facilities, 3,163 local jails, and 80 Indian County jails to hold the incarcerated population. The criminal justice system also utilizes military prisons, immigration detention facilities, civil commitment centers, state psychiatric hospitals, and prisons in the U.S. territories (25).

According to a 2016 analysis of federal data by the U.S. Education Department, state and local spending on incarceration has grown three times faster than spending on public education since 1980 (26). For the fiscal year 2017, it was reported that the average annual cost to cover incarceration was \$36,299.25 or \$99.45 per day^a for each of the country's 181,800 federal inmates. Housing an inmate in a Residential Re-entry Center comes at a lower price, costing the U.S. \$32,309.80 or \$88.52 per day on average in 2017 (27). Given the cost of holding a federal inmate and the current federal inmate count, this would mean that it is costing the US ~\$6.6

^a Under Title 28 of the Code of Federal Regulations § 505.2, this fee is calculated by dividing the number representing Bureau of Prisons (Bureau) facilities' monetary obligation (excluding activation costs) by the number of inmate-days incurred for the preceding fiscal year, and then by multiplying the quotient by the number of days in the fiscal year. - Federal Bureau of Prisons

billion annually to imprison those convicted & sentenced for federal crimes. Accounting for federal, state, and local inmates, incarceration costs the nation ~\$80 billion per year in direct expenses related to detention. When accounting for the economic social welfare cost imposed in addition to direct costs, this total can skyrocket to an estimated \$1 trillion per year. This economic social welfare cost includes the \$70.5 billion in lost wages, \$230 billion in lost earnings, the \$1 billion in lost revenue, the \$5 billion in criminal debt, the \$285.8 billion in “criminogenic nature of prison,” and the \$131 billion in the potential criminality in a child whose parent has been incarcerated(28). These costs equate to, on average, an extra ten dollars added to every dollar spent on corrections (28). While these numbers are extrapolations from the data and must be used with caution, they well illustrate the magnitude of incarceration’s cost to the United States (29).

The United States is home to 327 million people of different races, ages, religions, genders, and belief systems. Of that number, ~2.3 million are imprisoned and over 4.2 million are monitored by the criminal justice system either through parole or probation (25). Though all people in the US are subject to the current criminal justice system’s affinity for punishment, racial disparities in law enforcement result in the consequences of incarceration being disproportionately imposed on low-income communities of color. According to the most recent census, the United States population demographic is 63.7% non-Hispanic white, 12.2% African-American, 8.7% Hispanic white and 0.4% Hispanic-African-American. In comparison, the Bureau of Justice Statistics reports that 35% of state prisoners are white, 38% are African-American, and 21% are Hispanic (30). Without deeper context, one could assume that minority groups commit more crime. Though examining the composition of prison populations does reveal a clear disparity in racial representation, crude rate comparisons fail to highlight the

historical, cultural, and economic influences creating those disparities. As of 2011, 1 in every 3 African-American boys born in the US can anticipate becoming incarcerated at some point in their lives (31). African-Americans are not only more likely to be arrested, they're also more likely to be convicted and subsequently sentenced to longer confinement terms. In comparison to whites, African-American adults are 5.9 times and Hispanics 3.1 times more likely to be incarcerated (32). These disparities aren't a result of African-American citizens committing more violations punishable by arrest. In fact, this disparity can be best understood by exploring socio-economic and racial contextual factors that frame both the development of and current practices found in the criminal justice system. Historical racial injustices can be presently observed in the way the criminal justice system has developed over time.

Compared to other countries, the United States imposes a disproportionate opportunity cost on those convicted and sentenced to incarceration. Americans are not only incarcerated for crimes that in most countries wouldn't result in a prison sentence but sentenced much longer for crimes that *would also* trigger incarceration in other countries. Those with felony convictions have been characterized as 'partial-citizens' due to the post-release denial of some social benefits—public housing, welfare benefits, some college loans and grants, the right to vote, the right to live or work in certain places, and requirements to register with local authorities (33). The stripping of social benefits post-release removes a necessary safety net for the successful reintegration of releasees back into society (4). These post-release consequences do very little to accomplish the goals of incarceration. In fact, in many ways they serve to do the opposite by limiting economic opportunity and driving those with felony convictions to reoffend or violate probation and become reincarcerated. One result of the incarceration system's intentional

production of ‘partial-citizens’ is its innate inability to promote the empowerment and participation of *all* citizens.

The disproportionate representation of African-Americans in the correctional system, coupled with other forms of race-based discrimination, directly results in the consequences of incarceration affecting African-Americans more often and severely than the rest of the population. For example, African-American women experience reduced partner selection availability when a significant number of men from the community are incarcerated. As only 12% of African-American women marry outside their race, compared to 25% of African-American men, reduced partner selection has been shown to increase HIV rates in neighborhoods, along with clustering of HIV infections in these overwhelmingly low-income predominately minority areas (34,35). Few formerly incarcerated individuals secure employment pre-release, nor are given a practical path for eventually securing a living wage(36). For those with criminal convictions, a major barrier to successfully re-entering society and achieving financial security is the result of employer discrimination, often manifesting in the form of denial of licenses required for trade work. These denials severely hinder the earning ability for individuals with criminal convictions due to discrimination of occupational licensing boards rejecting applicants with conviction histories(4).

These barriers negatively impact their family’s capacity for achieving financial security, resulting in an increased likelihood to recidivate in order to survive. The consequences of mass incarceration impose generational harm upon families in the form of forced single-parenthood, trauma potentially manifesting in mental health difficulties, and cyclical poverty(37).

Incarceration in Georgia

Georgia was no exception to experiencing the spiking incarceration rates observed around the country as we transitioned into the 21st century. In fact, between 1990 and 2011 both the state prison population and spending on corrections doubled to 56,000 inmates and \$1 billion annually, respectively (38). At an incarceration rate of 1 in 70 individuals, Georgia began 2011 holding the 4th highest rate in the nation(38). Projections foresaw that without action, prison expenditures would rise by \$264 million and the inmate population would grow 8% by 2016 (8,39). Despite this dramatic increase in the fiscal and social cost of incarceration, rates of recidivism continued to linger around 30% and cost the state \$21,039 for every offender that became re-incarcerated after release in 2018 (38,40). This lack of progress represents a significant failure to address the root causes of offending and a missed opportunity for stemming the costs associated with cyclical incarceration. An intensive review conducted by The Pew Charitable Trusts found that 60% of prison admissions were individuals who committed drug and property crimes and at low risk of reoffending(8). Major drivers of this trend included severely limited sentencing alternatives for judges, few resources for social service provision integration, inadequate capacity for post-release correctional officers to maintain supervision over offenders, and lack of authority to design and implement evidence-based interventions(8). Subsequent reforms have resulted in increased success of taxpayer funded public safety efforts while allocating savings to invest in alternative courts, the Georgia Prisoner Reentry Initiative, Residential Substance Abuse Treatment programming, and job skill training (40).

Though Fulton County has made significant progress in advancing criminal justice reform efforts, the incarceration rate remains at 362 inmates per 100,000 county population as of 2016(10). On average, those incarcerated for misdemeanor offenses in Fulton County, GA in

2017 spent 8.5 days in jail before being released (41). In a 14% increase from the previous year, 423 inmates were released after confinement for 365 days or longer in 2017 (41). This discrepancy can be explained in part by those not necessarily arrested in 2017 but incarcerated and released during the course of the year. Of the 754 individuals arrested for a misdemeanor offense in October 2018, 55.7% (n=420) of them only spent between 0 and 1 days in jail before being released and 28.3% (n=213) remained in jail for between 2 and 7 days (42). Regardless of length of stay, individuals are absent from their communities and families, unable to work, and face a series of challenges upon release. These barriers often lead to re-offending , providing an explanation for why the recidivism rate for those released from Fulton County jail within 12 months remains around 30%, consistent with the rates from past 5-years despite reform efforts (41).

However, there has indeed been notable improvement in as a result of reform measures implemented by Fulton County criminal justice system in the past 10 years (43). Efforts have included improvements in individual case management, increased monitoring of incarcerated individuals waiting for trial, establishing programs aimed at restoring the competency of mentally ill defendants, and implementing measures to reduce recidivism. Impacts of these efforts are reflected in the reduction in average daily jail population by ~20% between 2005 and 2014 and a decrease in both violent and property crime rates by 6.3% and 9.1%, respectively (44). In contrast to these positive trends, the rate of arrests resulting in the District Attorney pursuing felony indictments reached a four-year high of 93% in 2017 and though the rate of arrests resulting in misdemeanor indictments by the Solicitor General was 50% at the end of 2016, it dramatically increased to over 80% by the second half of 2017 (41). With criminal justice expenditures rising and little success in reducing recidivism, developing and

implementing innovative solutions to stem the individual and societal consequences of incarceration is of increasing importance.^b

Societal Impacts of Mass Incarceration

Using incarceration as consequence for committing a crime is intended to serve as a measure for protecting public safety, for deterring the individual from committing future offenses, and for demonstrating the consequences of crime to the rest of the community(45). These intentions could be pure, however there does exist a point at which incarceration inflicts more harm upon a community than it strengthens and secures it. Presently, this point has not been definitely identified by independent research or criminal justice agencies. Realistic motivations can also be revealed through examining who and to what extent parties benefit from incarceration. For example, though the progress towards achieving the goals of incarceration can be measured by overall crime rates and rates of recidivism, these measures don't reveal the intricacies behind how & why individuals are sentenced to incarceration in the first place. A country grows stronger when its citizens are productive members of society and US policies that have resulted in high rates of incarceration benefit those invested in the perpetuation of mass incarceration far more than they do the rest of society. In the United States, the prison system is monetized through the purchase of stock, securing of supply contracts, provision of labor, and the imposing of quotas which lock state and local governments into agreements that require them to keep prisons filled to a set percentage or pay for unused beds with taxpayer dollars(46).

This industry relies on the current criminal justice systems inclination towards imprisonment, as CCA's 2010 annual report states:

^b Statistics reporting on trends in Fulton County jails apply to all inmates in any of their facilities, currently reported as including the Main Jail, the Alpharetta Annex, the South Annex, the Marietta Jail and Grady Hospital(41).

“The demand for our facilities and services could be adversely affected by the relaxation of enforcement efforts, leniency in conviction or parole standards and sentencing practices or through the decriminalization of certain activities that are currently proscribed by our criminal laws”^c

The involvement of politicians in these practices allow for the prospect of financial profit to drive decision-making in the criminal justice system and incentivize the perpetuation of mass incarceration.

In order to shift towards a criminal justice system that protects its population, while preserving their human rights, mass incarceration and its systemic causes must be addressed. Mass incarceration indeed imposes negative consequences on all of society, but the disproportionate targeting of people of color and low socioeconomic status by police has resulted in a much greater sacrifice of human opportunity by these communities. This undue burden is not just an inconvenience, it is a violation of the internationally recognized human right to freedom from discrimination. The right to freedom from discrimination is recognized in the Universal Declaration of Human Rights and woven throughout international human rights law through its inclusion in the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights. As the criminal justice system is intended to be just, this principle is negated by the exacerbation and perpetuation of racial discrimination. Though one intention of incarceration is the protection of the community, the collateral damage inflicted on the partners, children, family, and friends of those incarcerated often does more harm than benefit. Also, though the removal of criminals does protect the community in certain ways, there is evidence that removing too many people from ‘high-crime,’ and often over-policed,

^c CCA’s 2010 Annual Report on Form 10-K

communities may actually promote more criminal activity (37). One explanation for this may be “broken-windows” policing, or the concept of prosecuting small violations to prevent more serious crime (47). These policies serve to raise arrests, which are then reflected in crime statistics and tend to over-exaggerate the severity of crime occurring in these communities. This overuse of incarceration results in the degradation of human opportunity as being convicted of a crime limits an individual’s financial freedom, potential for education, and in many cases, the exposure to other inmates increases the likelihood of an individual becoming involved in crime in the future. Despite data on recidivism and crime rates in neighborhoods, there is limited research available detailing the efficacy of sentencing criminals to incarceration as a means of general deterrence. This data would be especially useful in not only measuring the success of reform efforts, but also identifying barriers to success necessary to address in the development of future interventions, such as excessive sentencing lengths.

Criminal Justice Diversion Programs and Initiatives

Nationally, recognition of the many problems rooted throughout our criminal justice system is growing and support for reform measures is at an all-time high. Advancements in substance abuse research and treatment, changing public perception surrounding addiction, heightened awareness of mental health challenges, overburdening of courts, increasing expenditures on corrections, and a general concern for the societal impacts that incarceration imposes have culminated in a push for a criminal justice system that is far more rehabilitative than punitive(11). Using a policy strategy aptly named “justice reinvestment,” reform efforts aim to reduce criminal justice expenditures and enhance community well-being & safety through ensuring only those who pose a legitimate societal threat are imprisoned, adopting effective evidence-based alternatives to incarceration, and ensuring resources are dedicated to

rehabilitative programming(11,40). Community-based diversion alternatives typically have an element of behavioral health intervention, may intervene at any point between police encounter and court sentencing, and in the context of this evaluation, result in the avoidance of a criminal conviction for the participant. It is the element of intervening at the law-enforcement level that make PAD unique in its ability to cease the cycle of incarceration before the consequences of arrest increase the difficulty for an individual to operate within mainstream society.

Diversion at the Law Enforcement Level

Diversion at the law enforcement level requires police officers to initiate the diversion process upon contact with a potentially eligible suspect, often occurring during a crisis situation where a behavioral health specialist may or may not be on the scene. This approach allows for evaluating street safety in live-time, provides officers an alternative to jail as a method of escalation, reveals insight into motivations of crime, and immediately links individuals to emergency service provision(11). One model of intervening at the point of contact is the development of a crisis intervention team (CIT), involving a group of officers specially trained to handle situations that may involve mental health crisis. Desperate to reduce the number of people with mental illness involved in the criminal justice system and avoid the escalated risk of violence associated with police officer interactions with mentally ill individuals, in 1988 the Memphis Police Department and University of Memphis researchers joined with mental health providers and advocates to form the CIT model now used in over 40 states in the US. Stemming from the CIT model, the “co-responder” model adds the presence of a mental health professional on the scene in addition to a trained officer. The need for the “co-responder” model came from the observation that many of the individuals the program served lacked access to mental health treatment and health & social services. In forming inter-agency teams with police officers and

mental health professionals, linkage to community-based service providers can be accomplished at the time of the incident (11).

Law Enforcement Assisted Diversion (LEAD) interacts with individuals at the law enforcement stage of criminal justice system through partnerships between police and social service providers working together to divert individuals better served by treatment than incarceration. In response to arrest, incarceration, and prosecution failing to stem recidivism rates, in 2011 Seattle developed a pilot for a harm-reduction based, community-based, pre-booking, collaborative approach to reducing recidivism called LEAD. The program bypasses criminal prosecution for individuals suspected of committing minor offenses, such as prostitution or shoplifting, and connects them with needed social and legal services. This innovative model of integrating linkage to service and harm-reduction principles to reduce crime has led to LEAD being scaled into a national model for diversion and criminal justice intervention. Though exciting, there is concern that LEAD was scaled up before its effectiveness has been established, essentially making it more of a “promising practice” than an evidence-based model. Generally, LEAD programs include a process for entering the program, requiring diversion away from criminal justice system, an integrated harm-reduction approach to case management, and system level organization and provider coordination involving criminal justice system. The LEAD pilot in Seattle began the referral process through identifying eligible offenders through arrest and eventually a system for referring individuals that officers suspect may be a good participant but have not been formally arrested. If the suspect agrees to diversion instead of traditional prosecution, they are linked to a homeless outreach program for intensive harm reduction-based case management, providing the participant with support to fulfill their specific needs. The participant also receives legal advocacy in the form of criminal justice system-wide coordination

in order to avoid legal consequences that counteract LEAD aims and ensure all stakeholders remain in consensus(48,49).

Thus far, evaluations of the LEAD pilot program in Seattle - King County, WA offer evidence of success in reducing recidivism rates, decreasing the utilization of and costs associated with the legal system, and increasing participants likelihood to secure housing, employment, and stable income after referral to the LEAD program(50). When compared with eligible individuals subjected to the usual criminal justice system processes, University of Washington researchers discovered that in the six months after joining the Seattle LEAD program, participants were 60% less likely to experience re-arrest and 58% less likely when examined over the entire five-year evaluation period (51). Further program evaluation centered around legal system utilization and associated costs revealed that over the same period, LEAD participants experienced on average 1.4 fewer bookings into jail per year, spent 39 less days in jail per year, maintained an 87% lower odds of becoming incarcerated in prison, and reduced their average annual cost to the criminal justice system by \$2,100, in contrast to the control group costs increasing by \$5,961(21). In revealing the ability of LEAD to reduce system utilization and save money in both the long and short terms, the consequences of failing to intervene are apparent in the rise in costs to the legal system inflicted by offenders in the control group. Though promising in the Seattle pilot, it is important to note that measurements of utilization and cost-effectiveness are highly subject to fluctuate based on government and local social service provider capacity, the profile of participants needs, and extent of investment. Overall, LEAD has the potential to improve the long-term relationship between communities and law enforcement agencies through introducing an evidence-based arrest alternative that forms collaborative ties with community stakeholders, addresses long-standing discrepancies between

community desires and police action (or inaction), and improves public safety while strengthening the community (52). As of February 2019, the LEAD National Support Bureau, which provides strategic guidance and technical support for jurisdictions(52), is considering 38 potential new LEAD program sites in 22 different states, developing plans for 17 programs in 14 states, in the process of launching five programs in three states, and currently have 34 sites operating in 20 states as geographically represented in *Figure 4*.

LEAD: Advancing Criminal Justice Reform In 2019

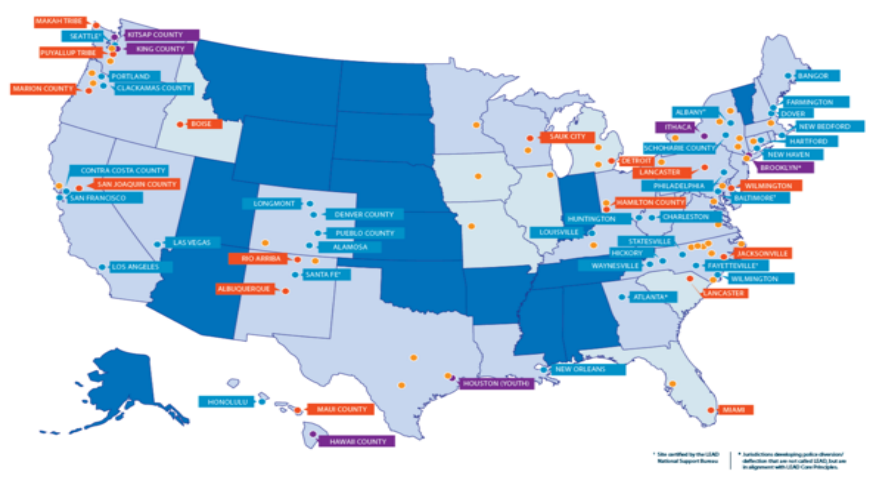


Figure 4. LEAD® National Support Bureau 2019 Site Map

Despite being inspired by and in alignment with LEAD Core Principles of harm reduction and housing first, PAD is not a LEAD certified program. The key programmatic differences between PAD & LEAD include:

	Law Enforcement Assisted Diversion (LEAD)	Pre-Arrest Diversion
Arrest & Charges	LEAD is a <u>pre-booking</u> diversion program. Police officers exercise discretionary authority to divert individuals after a charge has been generated. If the individual consents to participate, the charge is dismissed.	PAD is a <u>pre-arrest</u> diversion program. Police officers must document probable cause to divert, but do not make an arrest or generate a charge.
Social Contact Referrals	Police officers are may divert people into the program without probable cause, if they appear to need assistance and consent	At this time PAD does not accept social contact referrals. Police officers are only allowed to divert individuals if “but for” PAD the individual would be arrested and booked.
Initial Intake and Transport	Diverted individuals are transported in police vehicle to booking or diversion facility. Individuals must complete initial intake with care navigator within 30 days of diversion.	PAD Care Navigators in mobile response van meet officer and diverted individual at the scene of potential arrest within 30 minutes of call. Care Navigation team conducts initial intake and begins working with individual immediately; this includes providing a meal, personal hygiene needs, and temporary shelter if needed.

Table 1. PAD/LEAD Key Differences^d

^d Table obtained through personal communications

Transformational Relationships in Stakeholder Collaboration

In examining diversion programs within the criminal justice system, a common element remains the involvement, collaboration, and contributions of multiple organizations across the legal system, social service providers, local nonprofit organizations, and community members. Positive outcomes observed by diversion programs thus far have included intense system-level stakeholder coordination. This extensive coordination requires the use of transformational relationships to promote stakeholder buy-in, implement adjustments in response to stakeholder feedback, and establish a network of transparency and information sharing. Transformational relationships are characterized by two individuals or agencies collaborating in such a way that elevates both parties' motivations, moralities, and level of effort (53). Designing stakeholder relationships in a transformational nature should promote striving collective higher aspirations over individual stakeholder desires, resulting in a more effective work group (54). Though collective action is a core theme of transformational relationships, it is imperative for the leading agency to assess and acknowledge individual stakeholder priorities in order to create a culture of inclusiveness, encourage adherence to the vision, and work towards strategies in which compromise leads to progress and positivity(55). Transformational-style interactions based in mutual respect and understanding foster organization-wide productivity, but maintaining direction and concentration on a specific goal requires aspects of the traditional leader-follower transactional style relationship(56,57).

The LEAD program in Seattle demonstrated the power of transforming historically adversarial relationships in their collaboration despite the past lawsuit brought by the Racial Disparity Project which sparked animosity throughout the 2000s among LEAD partners Police

officers and officials. This animosity stemmed from a feeling of personal offense, as the police Captain put it, “This is personal. You're accusing us of racism” and the County Prosecuting Attorney expressed that “A lot of time and a lot of money had been spent, and it was very frustrating” (48). From the opposite perspective, Racial Disparity Project grew frustrated that police refused to self-reflect and “*that the litigation did not appear to be altering drug enforcement practices*” (48). Despite their turbulent past, LEAD stakeholders were able to set aside their differences and work collaboratively to design, implement, and operate the program. LEAD stakeholders credited each other’s “*willingness to keep communicating, put the past behind them, and search for common ground*” as fostering cooperation in working towards LEAD success(48).

Chapter 3. Methodology

Study Design

Thematic qualitative data analysis was used to identify stakeholder barriers and drivers to PAD by requesting stakeholders to describe the degree to which they feel involved and invested in the initiative, perceive the quality of institutional relationships, and report the initiative as good for the neighborhood and/or Atlanta. Data were captured during interviews with Pre-Arrest Diversion key stakeholders.

Program Description

PAD utilizes a housing first and harm reduction approach to providing intensive case management and linkage to care for participants with legal barriers to their success and coordinates the multiple criminal justice agencies involved to make diversions possible. The initiative redirects individuals who would be better served by social services and other community-based supports out of the criminal justice system. Police officers on the front lines working in the community are trained and enabled to divert people to immediate care at the time to avoid what would be a potential arrest for a wide range of possible charges. PAD aims to reduce the number of people in our courts and jails whose involvement is primarily due to unmet mental health needs, substance use/misuse, or extreme poverty by replacing detention with services. A common-sense approach to improving community health, safety, and quality of life defines PAD, Inc.

Population and Sample

Between April – July 2018, data was collected from individuals who agreed to be interviewed on behalf of the various PAD stakeholders involved with the planning, implementation, ongoing activity, and evaluation of Atlanta/Fulton County Pre-Arrest Diversion.

Partner Organizations

Evaluation interviews consisted of representatives from some of the key PAD stakeholders. Despite not *all* initiative stakeholders being interviewed, the selected organizations/groups come from across sectors and provide a diverse set of perspectives regarding stakeholder’s competing and aligned priorities, challenges to collaboration, and perceptions of PAD in their programmatic roles. The following stakeholder organizations’ perspectives were represented in interviews through one or more individuals familiar and/or working with each stakeholder:

PAD Stakeholder Organization	Representative(s)
Fulton County Department of Behavioral Health and Developmental Disabilities	1. Director 2. Behavioral Health Program Manager 3. Program Evaluation Specialist
Atlanta Police Department	1. Major 2. Lieutenant
Atlanta/Fulton County Public Defenders	1. City of Atlanta Municipal Court Public Defender 2. Atlanta Circuit Public Defender for Fulton County
District Attorney’s Office	1. Policy Advisor to the District Attorney
Fulton County Government	1. Chief Strategy Officer (Leads Strategic Planning Team)
Non-Governmental Organizations (NGOs)	1. Executive Director of Women on the Rise 2. Director of (Trans)forming and a Founder of Solutions Not Punishment

Table 2. PAD Stakeholder Organizations

Focus Group: Midtown Residents

One small group discussion was also held, was comprised of 4 males and 1 female resident of the neighborhoods within Midtown Atlanta, GA. Participants ranged in age from 27 – 48 years old and the distribution of race, sexuality, and residence is displayed in the table below:

#	Gender	Age	Race/ Ethnicity	Sexual Orientation	Area/ Neighborhood	Home Ownership Status
1	Male	38	Non-Hispanic White	Heterosexual	Midway/Myrtle Street	Own
2	Male	48	Non-Hispanic White	Homosexual	Next to “The Eagle”	Own
3	Male	27	Hispanic White	Heterosexual	East Midtown	Rent

4	Female	32	Hispanic White	Heterosexual	East Midtown	Rent
5	Male	45	Non-Hispanic African-American	Heterosexual	Garden District	Own

Table 3. Midtown Residents Focus Group: Demographic Breakdown.

The following figures visually display where small group participants reside (Figure 7) and their residences, as signified by a blue marker, compared to APD Zone 5 coverage, Midtown Atlanta perimeter, and the PAD pilot zone (Figure 8).

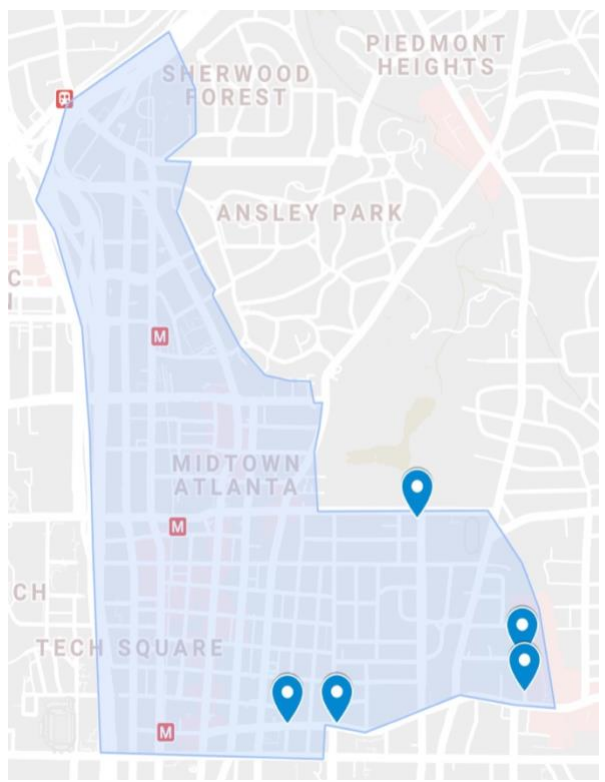


Figure 6. Approximate location of residence for participants.

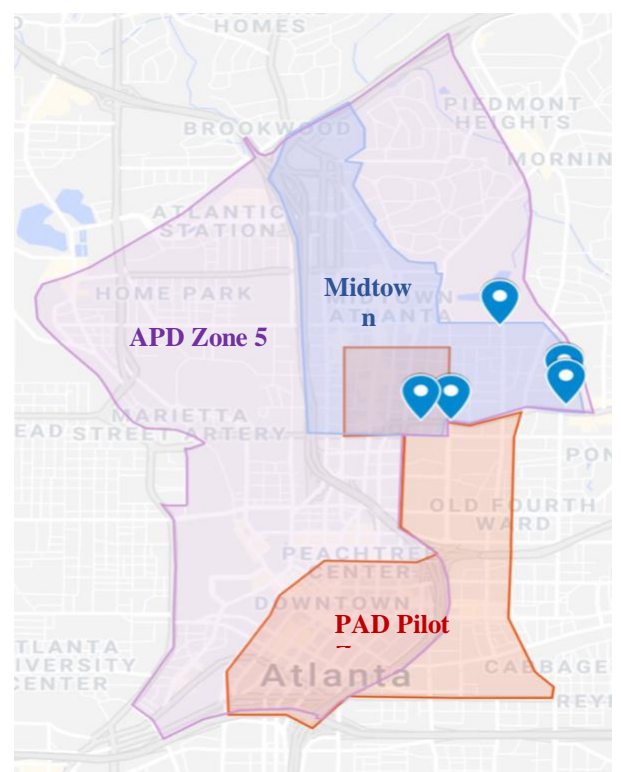


Figure 5. Overlay of newly defined APD Zone 5, PAD Enforcement Area, and boundaries of “Midtown Atlanta”

Interviewers and Interview Materials

Interviewer

Interviews were conducted by Kate Diedrick of the Research|Action Cooperative (R|A) in Atlanta. Diedrick is a university-level researcher with over a decade of experience in qualitative

research who conducts community based participatory research (CBPR) and utilizes grounded theory in analysis.

Interview Guide

Using open-ended questions to guide conversation, semi-structured interviews inquired about stakeholders' perspectives on PAD in general, aspects of their roles in PAD including challenges and priorities, and specifically: (*Adapted from PAD Process Evaluation Matrix & interview guide*)

1. Measures of **affective stakeholder buy-in** characterized by the:
 - a. Belief that all relevant stakeholders have had meaningful involvement in designing the initiative
 - b. Belief that the initiative has good staff who can implement it well
 - c. Belief that Atlanta has sufficient resources for the initiative to work well and sustainably
2. Measures of **cognitive stakeholder buy-in** characterized by:
 - a. Stakeholder perceptions that the initiative is more or less cost effective than current practice
 - b. Stakeholder perceptions that the initiative improves or devalues the neighborhood
 - c. Perceptions that the initiative reduces or increases crime
 - d. Perceptions that the initiative improves participants' quality of life, and that this is a good thing

Procedures

Potential participants were identified by LEAD staff and introduced the interviewer to the interviewees via e-mail. The interviewer followed up to schedule via phone and e-mail. Written

informed consent was provided to participants and signed prior to taking part in the interview. Participants were re-informed of the voluntary nature of the study and invited to raise any questions or concerns at any point during or after the interview. Interviews lasted between 34 minutes – 1 hour 35 minutes and participants were provided with refreshments. At the start of the interview, participants were given an overview of the interview topic and reminded the purpose of the study, that interview was being recorded, and that in their roles as participants, their responses would not be attributed to them by name. In the focus group interview, it was additionally requested the participants keep each other's confidentiality outside the interview setting. The focus group members also completed a demographics form recording gender, age, race/ethnicity, sexual orientation, and the area/neighborhood of Midtown the individual considered themselves as residing within. Additionally, in a few interviews there were individuals who joined without prior notice. Since it was revealing for one reason or another when stakeholder representatives wanted to pull colleagues in, the interviewer administered informed consent and allowed them to participate.

Data Management

Interviews with PAD stakeholders and Midtown residents were audio recorded and then transcribed using a transcription service called *Rev.com*. Transcripts were qualitatively coded, subsequently analyzed, and stripped of personally identifiable information prior to incorporation into evaluation results.

Data Analysis Plan

This analysis aims to provide a description of key stakeholders' overall perceptions, level of buy-in, priorities, and quality of relationships between partners within the context of the Atlanta/Fulton County Pre-Arrest Diversion Program. In order to analyze the data, we utilized

the qualitative data analysis software, MAXQDA2018 (Verbi GMBH, Berlin, Germany). Our team took a conventional approach to thematic analysis, forming a systematic process for classifying text using codes and theme identification. Codes were created inductively, meaning the interview content drove the individual and categorical, or “parent,” codes. Initial coding was conducted by a team of three graduate-level evaluators trained in qualitative data analysis from Emory University. Each coder individually coded the transcript and came together to reconcile discrepancies and refine the **codebook**. A codebook was exported from MaxQDA displaying a consolidation of codes, their respective memo definitions, and frequency of occurrence across transcripts.

Memo writing, highlighting, etc.

Chapter 4. Primary Findings

During their interviews, PAD organizational stakeholders and pilot area residents expressed their level of support, involvement, and investment in the initiative, described the nature of institutional relationships they engage in through PAD, and shared perceptions on the benefits of PAD for the neighborhood and/or Atlanta.

Stakeholder Characterization of the Pre-Arrest Diversion Initiative

Stakeholders expressed overarching support for PAD. PAD is appreciated for its holistic, comprehensive, and innovative approach to ensuring that individuals committing crimes associated with a circumstance are best served through service provision instead of incarceration. Elected officials such as the “*chief of police and Mayor Bottoms have both vocally been very supportive of pre-arrest diversion,*” contributing to spreading community interest in PAD and inspiring a willingness to consider alternative approaches to law enforcement. Community-wide support for PAD also stems from perceived success in aiding the community, as explained by the police commander:

“anything that reduces people going to jail, and shows that you're doing everything you can to care for the people in the community is always gonna be positive.”

In addition to support from politicians and entire communities, the Fulton County Chief Strategic Officer reports:

“It's been my impression dealing with both sides that there is a huge amount of support for the Pre-Arrest Diversion program on both sides of the criminal justice system, both the prosecution and the defense.”

PAD stakeholders believe in the initiative's mission, share pride in its progress thus far, express excitement for achievements in the lives of participants, and look forward to observing long-term benefits of PAD reflected in Atlanta's ongoing criminal justice reform efforts.

PAD's service-oriented approach and adherence to harm-reduction strategies aligns with ongoing criminal justice reform efforts. At all levels in government there is a growing collective understanding of the long-standing and pervasive issues rendering our present criminal justice system expensive, yet ineffective. PAD highlights the need for comprehensive streamlined services and fills gaps through extensive provider coordination in the meantime. As aspects of harm-reduction become more frequently integrated into interventions addressing issues ranging from STI prevention to substance abuse treatment, many funding agencies have adopted guidelines preferring proposals that include similarly aligned principles.

PAD has been able to secure major funding from Fulton County through alignment with the objectives of their Justice Reinvestment Initiative, which aims to reform the administration of justice in the county through exploring different strategies for achieving *“efficiencies on one level, but more importantly, address[ing] some of the criminal justice concerns that were prevalent not just in the county but across the nation.”* These efforts culminated in the creation of a reinvestment fund primarily for the purposes of financially supporting promising reform initiatives. The Chief Strategy Officer for the Fulton County Government expands below:

“Where Pre-Arrest Diversion came in was that we believed that this effort was in line with the criminal justice reform that we wanted to see happen in Fulton County. While most of the funding would go to agencies within the county government who came up with initiatives, we did see this as one outside effort that we thought aligned so perfectly

with our Justice Reinvestment Initiative that it warranted funding outside of the normal structure, which was to fund internal agencies.”

Stakeholders held differing perspectives on the ideal target population for PAD.

Stakeholders generally aligned on many ideal participant characteristics and shared the view that violent crimes should be excluded. Responses appear to reveal a pattern that stakeholders prioritized the population they had the most familiarity or interaction within their individual roles. Arguments were made through outlining their personal experiences with the population, referencing the history of Atlanta & PAD, and describing the burden of the issue by providing examples and demographics on relevant crimes and populations. Since the planning stage, there has been clear misalignment regarding which population PAD was initially intended to serve as the non-governmental organizations (NGOs) involved recounted,

“[P1] Well we [the design team] talked about it. We went back and forth literally- we fought-

[P2] ...That’s where some of the resentment and anger and stuff comes from. Because we went back forth about who we wanted to be a PAD client...”

The NGOs that advocated for the program’s establishment since the beginning felt that the priority population should be those who’s prospective banishment inspired its creation.

Representatives from these organizations explain:

“[P2] The targets was the people that were originally the targets they were going to ban those people should they should be the first priority. Sex workers. That’s what it was built for.”

“[P1] And trans people and trans women of color- and there have to be some participants- we wanted it- it to be something where women, you know. It’s easy to find a bunch of homeless men. So that’s another concern I don’t even see a lot homeless women yet in the- as a part of the participants.”

Other stakeholders described the target population as those they perceived to be disturbing the peace of those in the area and hindering economic activity. This perception is shaped by complaints received from residents, local businesses, and visitors, those stakeholders most often interact with in the criminal justice system who could benefit from PAD, and reports of negative sentiments towards neighborhood quality. APD Zone 5 Commander explains,

“Business owners don't want to arrive to work to find individuals sleeping in their doorway. They don't want individuals in their businesses aggressively panhandling, stealing, harassing. That's a phrase often given to us, their customers that impact their ability to conduct commerce. The outcome they want is to see individuals not doing that.”

Stakeholders providing behavioral health services outlined one of *“the biggest challenges, county-wide, state-wide, probably just country-wide, is that we don't want our jails to turn into psychiatric units for individuals that need behavioral health services.”* This sentiment is echoed by public defenders reporting *“on any given day there’s about 700 people in the jail on psychotropic medication and that’s not counting all the people that are drunk and alcohol*

problems as well...we see a lot of cases...social work [is] out of necessity because that's the nature of our clientele."

Finally, stakeholders provided characterizations in the form of which types of individuals are prioritized as those the most in need, at high likelihood of offending or reoffending, and at high-risk for negative encounters with police due to behavioral health challenges. Because the conditions driving the incidence of quality-of-life crimes are often intersectional, stakeholders expressed the need for prioritizing the targeting of populations with overlapping conditions. These are the individuals often the most susceptible to the harms of ineffective incarceration policies that contribute to entering a life of cyclical crime. There is also recognition that individuals in this population may have increased trouble qualifying for other alternative justice programs. This led to the *"the idea that they would look for people who are not eligible to go into some of the other programs."* From the perspective of a public defender,

"I think people number one who have mental health, drugs and alcohol problems. That's the group that we are trying to provide services for primarily because they're the people that when they are arrested they stay in jail longer, it's harder to get them out on bond, because a lot of the people are homeless, as well as having mental health issues and drug and alcohol issues."

Affective Stakeholder Buy-In

These sentiments were shaped by a variety of elements including the stage at which the stakeholder joined PAD, the role they currently play in PAD, and general agreement or disagreement with stated PAD principles and procedures.

I. Belief that all relevant stakeholders have had meaningful involvement in designing the initiative

Of those involved in the design process who were interviewed, most felt as though they indeed had meaningful input, especially in the early ‘action-oriented’ stages of PAD’s realization. Despite involvement in core development of PAD, a few design team members expressed frustration at what they understood as the design team making definitive decisions at one meeting, re-discussing the issue at the next, and finally, changing the element despite vocalized opposition. Stakeholders also perceived involvement in day-to-day PAD activity influenced the level to which they felt responsible for participant success.

II. Belief that the initiative has good staff who can implement it well

Overwhelmingly, stakeholders trusted PAD staff and care navigators’ motivations and commitment, their capabilities to foster positive communication, coordinate PAD players successfully, and implement sustainable programmatic governance structure. Despite a variety of stakeholders wanting to shape the program around their individual organizational perceptions of priority, one stakeholder gave “*credit to the leadership of PAD*” for their dedication to maintaining a participant-centered focus through “*really understand[ing] the population they’re serving and the work that they’re doing to reach the population.*” Further support from APD praised the PAD director’s “*structure, meetings, informal coffees...conversations*” because they felt “*kept abreast of the functional sides of it and the challenges.*” He expresses his desire to “*bottle that energy and then duplicate it throughout the*

officers. They're both just very engaged and have a passion for what they do.” However, stakeholders did express concerns over the:

- Failure to ensure presence of an experienced and qualified mental health professional on **all** PAD call responses
- Discrepancy between limited PAD operational hours and 24/7 policing, allowing for loss of potential participants, confusion among officers, and
- Need for replacing a quickly aging criminal justice workforce and building new relationships as individuals retire and long-standing relationships dissipate
- Insufficient number of care navigators to manage current calls and future increasing demand. potentially resulting in long wait times for officers or less personalized participant attention due to increased workload

Stakeholders representing NGOs and the Midtown neighborhood advocated for the inclusion of more team members and care navigators with lived experiences similar those situations commonly found in the lives of potential participants. Speaking from first-hand experience, one Midtown resident explains why:

“...in my mind, the most effective way to make this program be successful would be to have former sex workers, former drug addicts, former homeless people in the role of Care Navigators because they have the lived experience of recovering from, whatever, to come to a life of productivity and meaning...speaking as a former sex worker...I came through that, and I'm able to use that experience to help other people. And, changing the tape is an important part of life for individuals and communities. How are we going to change the narrative of what happens in Midtown? By changing the narrative of individual lives.”

Having personal familiarity with the experiences of participants allows for a deeper “base” trust between navigators and participants and a better anticipation of the complex set of needs individuals may require. As more participants successfully complete the program, eventually these individuals could be encouraging as mentors and living examples that participants could connect with and build stronger positive social networks.

III. Belief that Atlanta has sufficient resources for the initiative to work well and sustainably

None of the stakeholders demonstrated confidence in the ability for Atlanta to provide all of the quality, consistent, and ideally, comprehensive resources needed for long-term PAD sustainability. All stakeholders reported concerns over the breadth, quality, availability, cost, and stability of services offered by potential service providers in the Atlanta, GA area.

Housing. Multiple stakeholders reported the most pressing service need as housing, specifically, not just shelter, but supportive housing for this population. Because individuals in the target population may require attention for a more complex set of needs, combining of issues increases barriers for participants and care navigators as many service providers are only trained and able to provide their service their way. Clients with multiple conditions lack options for supportive services comprehensive enough to properly provide aid. Even though social workers assisting in the Public Defender’s Community Court “*do a great job in finding some placements...it’s very difficult to find placement for people who are dual diagnosed.*” Applying harm-reduction principles in this population is vital in order to meet individuals where they are and keep them engaged with their rehabilitation.

Funding. All stakeholders shared concerns over ensuring sufficient and sustainable funding for PAD and necessary services. Concerns arose from the volume of criminal justice actors trying to secure funding from the same pool. Lack of financial security makes it difficult to secure long-term service prison agreements as service providers would prefer assurance of necessary funding.

Atlanta Police Department. Stakeholders observe the Atlanta Police Department (APD) as lacking sufficient resources to efficiently police the communities they serve while accomplishing PAD expectations and processes. As the front-line representatives of PAD, police officers are the primary stakeholders involved in initiating the diversion process, making their genuine desire to learn about and participate in PAD a key factor in PAD success. Department representatives themselves reported their performance and involvement in PAD as being hindered by personnel shortages, financial strains, competing priorities, time constraints on encounters, and a lack of a centralized resource hub to divert individuals to instead of arresting. A decrease in people joining law enforcement combined with an increase in retirements due to aging and departures as a result of uncompetitive salaries has created a crisis of manpower and reduced ability to monitor and address crime properly. The results of which can be identified through resident's reports of not enough officers being available to conduct patrols in Midtown, a by-product of law enforcement's shift to addressing an uptick in addressing serious crime and less persecution of low-level quality-of-life related offenses (the main PAD target population). Higher-level crimes are addressed first, meaning those who complain of a relatively minor crime may wait an entire day before an officer can contact them about their report, leaving residents feeling neglected. APD feels pressure to reduce complaints

from business owners and Midtown residents, requiring a focus on adequately improving the appearance of crime in the area, leading to opportunities for neglecting to prioritize the needs of the participant.

Sustainability. If we do program and then can't provide we're negatively impacting the health and well-being of participant, increasingly their likelihood of reverting to negative behaviors, and damaging the perception of PAD's dependability and permanence. Since the target population's needs are so intersectional and in many cases, immediate, service provision structures should be designed to intervene quickly, assess needs appropriately, and provide treatment until the participant is considered 'graduated' from the program. Stakeholder perspectives around ensuring continuous service provision are particularly in need of significant consideration in the context of PAD, due the program's heavy dependence on service linkage as a core feature to success.

Wraparound service provision. Stakeholders complained of a lack of "one-stop shop" type service provider agencies. There are very few place participants can get wraparound services in one place equipped well enough to provide mental health treatment, substance abuse rehabilitation, and a path for transitioning out of homelessness. Stakeholders collectively conveyed the necessity of "programs where we can place people who need certain help to get everything they need." As described by NGO stakeholders, basic 'human rights' services, such as an opportunity to shower, obtain clean clothing, and receive food and drink, should be prioritized as immediate provisions and indispensable. Across all stakeholder groups, the need

for provider coordination and streamlined care management plans presented in a desire for an improved service provision model.

Diversion Resource Center

As mentioned above, in discussing resource needs, multiple stakeholders communicated their desire for a centralized location for resource provision. Their justification stemmed from a variety of reasons including making it possible for navigators to coordinate a service plan using individuals in the building, easing participants barriers to adhering to care plans, eliminating the need for police to wait on scene for care navigators, reducing care navigators' need to spend as much time outside the center, and opening a "self-referral" path for those in need of services to join the program without encountering police first. One Midtown resident suggested *"a Pre-Arrest Diversion Center that is part of a larger resource center for all these populations...a permanent place, a behavioral health resource center for Fulton County"* and goes on to offer suggestions for how residents could help by sharing "a card...on the outside of the fence saying, *"Go, here,"* perhaps replacing a call to 911. The same resident highlights the presence of such centers in most major cities comparable to Atlanta. The establishment of a diversion center presents the opportunity to lead the way in expanding comprehensive service provision as a tool for primary prevention of quality-of-life related crimes.

A potential one site service model provides the space *"where a need can be diagnosed right away"* and all stakeholders involved feel less burdened by the challenges of working within siloed systems. This also created the capacity for reaching a far greater audience without requiring additional engagement from an already overworked law enforcement system. Though the possibilities are exciting, concern was presented over ensuring that proper capacity is built before embracing too many clients for the extent of available resources. Though the purpose of the diversion center is generally aligned across stakeholders, there are a wide variety of suggestions for design and implementation, including:

- Operating 24 hours a day, 7 days a week, 365 days a year to align with police enforcement hours
- Selecting a central building location within PAD pilot zones and proximal to public transportation
- Ensuring building is structured to facilitate provider partners to having office space
- In-house coordinating and provision of:
 - basic mental and physical health services,
 - job and skill training,
 - bathing facilitates and basic hygiene needs,
 - legal and social services,
 - immediate shelter, transitional housing, and aid in securing long-term permanent housing, among other resources.
- Repurposing the closing jail into the new PAD center
 - using pre-existing infrastructure to easily utilize housing design to create new temporary housing
 - symbolically show transformation and progress in operating under the city's new approaches to addressing crimes of poverty

As of the completion of this evaluation, Fulton County government has awarded \$800,000 of funding to advance the progress in realizing the goal of implementing a PAD-run comprehensive diversion center in downtown Atlanta. This funding was in part secured through the Fulton County Mental Health Injustice Task Force's advocating for the high prioritization of establishing the PAD program center. As of April 2019, PAD leadership report the initiation of the planning process very soon and anticipate the center to begin operating by mid-fall to the end of 2019. PAD leadership sees this diversion center as a way to service a wider target audience, connect individuals to a peer support network, reduce barriers to care in PAD posed by required justice system involvement, and demonstrate the value of service provision as an effective tool against low-level crime in Atlanta.

Cognitive Stakeholder Buy-In

In examining stakeholder responses surrounding their perceptions around cognitive buy-in, it became clear that stakeholders often shared similar drivers for investing in the initiative yet differ in their organizational barriers to action. Stakeholders offered their perspectives on PAD's cost-effectiveness, how the program affects neighborhood value, ability to reduce crime, and extent to which it improves participants' overall quality of life.

I. Stakeholder perceptions that the initiative is more or less cost effective than current practice

Responses indicated an overall consensus among stakeholders that the current model of law enforcement imposes an undue exorbitant financial burden upon the government and taxpayers. Unfortunately, there has been very little return on investment as the criminal justice system that has failed to make significant progress in reducing crime and alleviating the underlying conditions that drive individuals to commit crimes in the first place. As recidivism is difficult to curb without actually addressing the individual's long-term needs, without adopting a service provision model, individuals will continue to offend and likely re-offend, costing society through financial expenses but also lost productivity. A public defender advocated for the system to, as he described it:

“...be more social services oriented, more legal services oriented, and less about just arresting this population, cycling through the court spending a ton of money- even you know these people that spend an average of 10-30 days in jail at a cost of over 100 dollars a day which makes absolutely no sense when that money could be better spent on prevention. So, to me it's an economic issue.”

By investing in the long-term rehabilitation of individuals, the city has the opportunity to generate economic activity through an increase in participant's contributions back to their community, retain what expenses would have been lost with the utilization of traditional, expensive criminal justice enforcement processes, and alleviate the police force's strain on resources, a shortage partly attributable to imposed by excessive quality-of-life related offenses.

As one stakeholder put it:

“Because you haven't caused a problem over here in corrections, but you've saved money by diverting that same resource to treatment or housing or whatever it is.”

As PAD cost-effectiveness studies are still ongoing, the likely potential economic benefits can be foreseen in the form of saved city resources, increased workforce participation, and reduced spending on efforts that fail to produce a return-on-investment. These economic benefits are particularly attractive to government stakeholders who answer to the public for spending taxpayer's money and continually face a heightened demand without additional funding needed approach the issue traditionally. Hence, it makes sense that a representative of the District Attorney's office shares the office's desire *“to use the money the most effective way to get the best results”* as the District Attorney *“has been committed to reducing the jail population...Each time any defendant is in jail, that's \$77.20 per day...keeping them out of jail. That's great.”*

II. Stakeholder perceptions that the initiative improves or devalues the neighborhood

Many of these stakeholders expressed optimism over PAD's utility in improving neighborhood value, quality, and appearance contingent upon its level of success. As gentrification increases in historically low-income areas of Atlanta, the voices of new, higher-income residents and businesses hold more significant influence. For some stakeholders whose

positions are elected, these voter's voices shape their support of PAD as they vote based on the appearance of improvement, not numerically quantified declines in crime. As the DA's policy advisor explains,

“And they said literally that the boss likes the image of it, likes the idea of it, likes to appease the business community about it, but on the other hand he's also tough on crime and if you sell a case too short he's you know, so the line prosecutors are getting mixed messages. They're getting that there is this program out there, but I can't sell my case cheap because I'm going to get brought into the office, so they don't refer those cases.”

Gentrification rapidly introduces a new population to an already populated area, increasing strain on resources, displacing existing community members, and setting the foundation for an adversarial relationship as the two groups learn to co-exist. Because the incoming population is essentially diametrically opposed when examining demographics such as race, education, and income-level, difficulties in understanding each other's perspectives, priorities, and needs are exacerbated. Not only is this population imposing upon an already existing community, it makes life harder for those who lived there before as cost of living rises and economic opportunities flourish for new residents, as they are designed with the incoming population in mind. These factors combine to worsen the conditions that lead to individuals committing crimes of poverty. PAD provides a valuable tool for combatting the negative influences gentrification imposes on a pre-existing community member's ability to live and survive without the need to commit a crime, while working to mend the divide between neighborhood residents that fall within the PAD target population and their complainant-neighbors.

Stakeholders perceived PAD as improving the economic value of neighborhoods through improving overall area perception and attracting individuals and business to generate economic opportunity. APD outlines how this logic benefits all neighborhood stakeholders by explaining,

“the more people that come and spend tax dollars in Atlanta, Georgia means more money that's available to fund programs like PAD. If PAD is successful, then we will have more people staying in our hotels. We'll have more people in the downtown space. Conferences will return, the tax base will grow and then hopefully we can get more money given to mental health, drug addiction, alcohol addiction, job training, particularly around those individuals that have to engage in prostitution.”

In discussion surrounding the impact of crime on Midtown, one resident acknowledged that he

“...knew what I was moving into. You know the sex workers and homeless people were there before me. You know, it's their neighborhood, and I'm moving into it...”

In contrast to this offering of a neighbor's perspective, another resident informs the group that crimes of poverty *“impact everyone's quality of life in this neighborhood. Let's just get real, it impacts property values and those are real things to real people who've worked hard and invested a lot of money to live where they want to live and raise their families.”* PAD can bolster the value of neighborhoods by generating or reviving economic opportunities, freeing up funds for reinvestment in community improvement, and protecting resident investments made towards improving quality of life.

As these interviews were conducted 6-months into program implementation, it should be acknowledged that perceptions of added value were in some way held already for those involved in advocating for the creation of PAD and planning the initiative. Reasoning follows that for a

stakeholder to invest in bare the idea of the program, they believed in the positive value that PAD would contribute back into the community. This awareness is necessary to avoid attributing these perceptions of added value as solely attributable to PAD success to date. Without a measurement of stakeholder valuation at pilot start, it is difficult to accurately infer the way in which the program's first 6 months shaped these perceptions.

III. Perceptions that the initiative reduces or increases crime

In sharing their perspectives on PAD's effect on crime, stakeholders unanimously rejected the idea that PAD contributes to increases in crime. Though no one believed PAD would worsen present issues, stakeholders did indeed divulge the reasons behind their varying levels of skepticism and belief in the extent of its ability to reduce crime. Confidence in PAD was also reported as differing depending on if the stakeholder was describing its effect on day-to-day crime levels vs long-term trends in crime. This was to be expected as harm-reduction interventions allow the negative behavior to continue as treatment is ongoing, meaning PAD participants may reoffend, even multiple times, before 'graduating.' Despite this possibility, there is significant faith in explaining the reasoning behind their support for PAD, the Fulton County Chief Strategic Officer states:

"We do believe that it will positively impact our jail population, but more importantly, we will reduce the chance that these individuals will re-offend because rather than putting them through a criminal justice process we will get them the mental health support that they need and the substance abuse treatment that they need."

Though the program's government stakeholders express their measures of success in numerically quantifiable data, as explained by Fulton County Government:

“...I think that the diversion outcomes are ... Well, first of all, the number of individuals that they divert would be one telling factor, but the one that's willing to be most meaningful in terms of defining success is going to be the recidivism rate of those individuals that have been diverted. So those are, to me, the two primary metrics by which we would measure success.”

Stakeholder's perceptions around PAD's usefulness in the community is the main factor in garnering neighborhood support. As explained by Zone 5 Commander:

“If we're saying we're using PAD and the citizens aren't seeing any improvement, I think we'll lose community support very quickly for PAD. Very quickly, and then they're going to ask us to return to traditional arrests and enforcement of law to bring about the desired result that they want, which is don't use my back door. Don't use my yard. Don't use my street for prostitution activity. I think if we take PAD and we say we're using PAD to solve your problem, but the problem is not impacted, you're going to quickly lose community support.”

In discussing PADs impact on the landscape of crime and punishment in the city, a stakeholder representing the public defenders point outs that:

“They're not serious crimes. Like the statement one of our judges makes, 'these are the people that we don't like they're not the people were afraid of.' And there's a lot of truth in that statement, so I think that's the importance of the PAD program. Is that punishment is not necessarily a solution to these problems. So, locking somebody up doesn't do much of anything aside from cost the tax payers more money and take away otherwise valuable police resources dealing with a mental health issue, or dealing with a

homeless issue, something that's solvable in another way that could be utilized through a third-party service provider"

Though overall stakeholders feel about positive and hopeful about PAD, there is some concern about what if someone in the program chooses to chronically reoffend or escalate the severity of their crimes. One stakeholder reported this challenge to assuring stakeholders that public safety is maintained, citing:

"two people who are with the working group have identified a situation that because we don't want anything to happen where somebody is in PAD and they go out and commit a vicious or a violent crime uh because there are detractors, as Ken said, not everyone is on board"

This fear was echoed in the District Attorney's office worries about lack of enforcement measure, or "stick" to keep participants involved, adherent to their care plan, and avoiding engaging in crime:

"I am only as effective as the teeth that I have. So, without teeth, any defendant, now I'm taking it out of prosecution, any defendant can do whatever they want. So, we as prosecutors have a law that we just uphold, and that law spells out the consequences. You take out the consequences, then essentially what else do I have? That's number one."

There is agreement that more time is needed to quantitatively assess if there are statistically significant reductions in crime as a result of PAD, however because appearances of neighborhood crime hold the same or greater value to residents, their perceptions become reality.

IV. Perceptions that the initiative improves participants' quality of life, and that this is a good thing

Many stakeholders expressed the satisfaction and fulfillment they derive from participating in the improvement of target participant's lives. PAD success stories contribute to generating continued stakeholder buy-in and sincere belief in the initiative's potential positive impacts. All of the stakeholders acknowledged PAD's immediate day-to-day quality of life benefit to participants, very few mentioned the advancement towards permanent legislative change as a major positive outcome.

"[NGO2] A favorite part of my work is being able to um support people that have been impacted by the system in a way that like changing laws where they were no longer have to face those barriers. I feel like its meaningless to work on a law and don't change it for people that have been impacted."

Though few, some stakeholders did indeed share their vision of PAD as an advocacy tool for inciting a permanent culture shift towards decriminalization and commitment to rehabilitative law enforcement models. The non-government stakeholders interviewed shared a story demonstrating their commitment to not only improvement in participant's immediate quality of life, but changing the circumstances influencing their long-term prospects of recidivating.

"[NGO1] We fought for if someone has uh has a path to be on the sex registries we really went back and forth explain that we had a young lady that we fought for that was a prostitute, but she was like 17 and the girl she was with was 15 but she ended up with a sex register you know so we met the judge because we went to fight for her and she dismissed it

[NGO2] And she dismissed all the charges and restored all her rights and everything else."

The prospect of changing individual's lives serves as major motivator for remaining engaged in the work that stakeholders have committed to, as expressed by the public defenders:

“The work we do is important because it effects the population that is sort of least desirable in society and we spend a considerable amount of time and resources in sort of lifting that population up and making sure that they are housed, and employed, and free from any substance tendency. And that in itself kind of makes everyone go home with a smile on their face and enthusiastic about coming into work the next morning.”

One challenge of PAD is the necessity of participant's desire and commitment in order to achieve what improvements the program is capable of achieving. This challenge is particularly frustrating to police as reporting sentiments from beat officers such as *“oh my god! I just let just let this guy go but he's still on the corner.”* However, those higher up in APD leadership demonstrated an understanding of basic harm reduction theory, hopefully to eventually trickle down to lower ranks. APD command understands that the individual may reoffend or relapse, at no fault of PAD, and explain:

“But that's an individual thing, and some people take longer I guess to realize they need to get help. But just to see that this is one less person that has to be in the system, and somebody that's now got a chance of being a productive member of society, I think that in and of itself speaks to what the program, you know, could offer.”

Just like organizational stakeholders, potential participants must undergo a shift from perceiving law enforcement as a punitive force to viewing officers as community servants. There are barriers present in participant's belief that the change in police officers is genuine, that the new program is different and does what it says it does, and that the program isn't more challenging than serving the usual minor sentence.

Chapter 5. Discussion, Conclusion, & Recommendations

Discussion: Transforming Stakeholder Relationships

Though each stakeholder expressed investment in PAD's success some way or another, due to the specific mission of each partner, priorities have already differed in the past and eventually will conflict again in the future. Adhering to a specific, mutually agreed upon set of guiding principles during the planning stage allows for stakeholders to hold each-other accountable through program implementation, inform stakeholder's prioritizations, and ensure activities remain centered on achieving PAD outcomes, not individual stakeholder priorities. As opposed to most diversion initiatives, bottom-up community-driven approach prioritizes participants and strengthens adherence end outcome from perspective of participant as a guiding principle.

PAD's collaborative approach to stakeholder engagement was identified as key programmatic element to long-term success. Stakeholders praise PAD's relationship building among partners as unique in the field, inclusive by design, and informative, improving efforts towards fostering cross-section collaboration. They appreciated the opportunity to form and maintain meaningful relationships with a diverse set of service providers, government agencies, and community representatives in a purposeful and innovative way. Stakeholders valued the various opportunities to interact with stakeholders whose organizations who don't regularly interact with. Facilitating conversations that allow for sharing each other's successes and challenges within their roles in PAD, they can support each other they don't communicate with regularly. As a result, PAD operation is improved by having all stakeholders participate in aligned in principles, actions, and end vision for the benefit of the participants and public safety as a whole.

Facilitating exposure to diverse perspectives through storytelling is an effective tool for shifting stakeholder mindsets. Understanding the experiences of another stakeholder group is challenging, but vital in transforming stakeholder's views of each other. Storytelling has a unique ability to bridge gaps in understanding the way unfamiliar or adversarial groups experience life. Telling stories centered around PAD stakeholder's experiences changes the lens in which situations involving PAD participants are viewed by various stakeholders. Stakeholders can grasp to these demonstrative examples, share them, and model the proper, trained, PAD program technique in the field. Sharing stories allows for the exploration of issues that may arise in their role in PAD, provides an opportunity to identify and praise positive actions, and discuss which could be improved upon in a non-critical atmosphere. Stakeholders can use this information to reflect upon how they'd best intervene according to PAD principles, how the challenges facing one stakeholder affects all of them, and gain perspective on the nuances of PAD operations. Stories convey messages from a personal perspective and change the way people understand each other, especially the target population. Participant success stories represent living examples that PAD strategies help the community and individuals in need of a path forward instead of the cyclical consequences of incarceration.

Understanding the perspectives of other stakeholders eased the resolution of conflicts and provided a holistic, diverse view on program challenges and potential solutions. Stakeholders sharing their perspectives gave insight into how competing priorities can be detrimental to program cohesion and collaboration. Priorities and biases, conscious or unconscious, influence the way key programmatic elements are interpreted and applied in PAD implementation. Identifying how stakeholders prioritize program aims can inform targeted stakeholder-specific

strategies for ensuring goals are met, issues are addressed promptly, and buy-in is unwavering. In addition, in situations involving conflict resolution, understanding stakeholder priorities gives insight into the core conflict between groups and which compromises are most likely to be accepted by all sides. Having a grasp of both overall PAD and individual stakeholder priorities provides the group with an awareness of each other's mentalities, challenges and barriers occurring in other areas of PAD, and share previous successes and failures using certain strategies. Through this, stakeholders have the ability jointly & holistically problem-solve incorporating the input of each invested group. Having a diverse pool of perspectives also allowed for an overview of influences on stakeholder perceptions and actions around PAD. For example, law enforcement's desire to please businesses or constituents may influence the type of person diverted and when & where that encounter occurs.

Traditionally adversarial relationships between stakeholders can be transformed through mutual investment in working towards a shared vision/goal. When stakeholders shared a common goal, they were more inclined to consider the perspectives of other organizations in their approach to program planning. Incorporating various inputs gave stakeholders the opportunity to familiarize themselves with stakeholders they rarely interact with and those typically viewed as their opposition. Sharing a vision for PAD success created the conditions in which stakeholders view each other as partners, not adversaries. Long standing biases influencing present day perspectives must be identified and acknowledged in order to begin to overcome barriers in stakeholder's trusting each other, adoption of PAD principles and practices as intended, and belief in the program's ability to achieve aims. By 'reaching across the aisle,' PAD encourages the emergence of a criminal justice environment in which stakeholder's mutually enriched

understanding of each other as a necessary step to improving the safety and quality of life of *all* community members.

Securing genuine affective and cognitive stakeholder buy-in takes intentional and transparent information sharing, long-term sustained engagement, realistic expectation setting, and appeal to the stakeholder's priorities. Stakeholders stressed the importance of changing the traditional model of siloed information and insulated knowledge of other stakeholder's day-to-day duties and priorities. Transparency and honesty were key elements of trust building between stakeholders, overcoming histories of distrust between certain stakeholders. Ensuring stakeholders remain engaged long-term will require attention to specific stakeholder concerns and requests, fostering an environment where sharing experiences is encouraged and valued, and creating opportunities for stakeholders to interact with each other and ultimately feel like they have a key part in PAD's success. Soliciting, maintaining, and increasing stakeholder affective and cognitive buy-in requires adaptation based on the stakeholder. Competing organizational priorities and sector-specific challenges should be understood and acknowledged in negotiating compromises on decisions regarding PAD's future. Managing realistic expectations is crucial to stakeholder alignment as all parties confer to create a pre-awareness of practical achievement, avoiding disappointments in PAD caused by deviations from what stakeholders' anticipations.

PAD has the potential to inspire long-term shift in societal perceptions surrounding criminal justice system. Stakeholder collaboration has the potential to serve as a model for significantly shifting mindsets around alternatives. Changing the cultural perception of

diversion initiatives and harm-reduction based interventions paves the way for new standards for law enforcement and policing of populations at high-risk for incarceration, such as those experiencing extreme poverty and suffering from mental health ailments. The process of changing long-term mentalities was compared to “peeling an onion” by non-governmental stakeholders involved in advocating for policies supporting a departure from punitive sentencing towards rehabilitative approaches to criminal justice reform stemming from underlying causes potentially exacerbated by incarceration. Through demonstrating the superior benefits of PAD and similar alternative programs, community support for other non-traditional efforts to reduce crime. According to those working with PAD from inside the criminal justice system, they hope to make alternatives such as PAD a normal part of criminal justice operations and increase community understanding of new best practices. In working towards this new norm, stakeholders hope community residents move towards perceiving target participants as neighbors instead of nuisances.

Stakeholder Recommendations

Though all expressed generally positive perceptions of PAD, stakeholders had various recommendations for PAD program enhancement summarized below:

Area of Improvement	Recommendation(s)
<i>Advocacy</i>	<ul style="list-style-type: none"> • Increase advocacy efforts to engage with lawmakers and politicians to advance public support and funding • Replace arrest with citation for low-level quality of life crimes
<i>Communication & Engagement</i>	<ul style="list-style-type: none"> • Increased communication from PAD staff with stakeholders about participant’s success and challenges through updates to the diverting officer • Share updates regarding PAD milestones and set backs • Facilitate more opportunities for stakeholders to gain hands-on experience with PAD

	<ul style="list-style-type: none"> • Include more stakeholders with lived experience instead of academics • Discuss mechanisms for keeping each other engaged and accountable • Educated community to stop calling police about low-level crimes
<i>Expansion</i>	<ul style="list-style-type: none"> • Expand zones across city and eventually replicate across the state
<i>Monitoring & Evaluation</i>	<ul style="list-style-type: none"> • Conduct additional research • Monthly meetings with officers from each zone to improve referral process • Incorporate a debrief/sharing at each police roll call, adjust to information on sooner feedback loop and develop a familiarity and regularity with PAD, address issues sooner • Align with Fulton County “<i>strategy and performance management office in order to help them collect and monitor statistics related to the outcomes that the program are designed to achieve</i>”
<i>Policing</i>	<ul style="list-style-type: none"> • Reduce dependence on police encounters for PAD referrals • Increased police training for officers already participating • Increase number of police officers receiving PAD training • Increase participant referral goals to encourage preference towards diversion • Increased Crisis Intervention Training (CIT) training for officers to cover large population not in pilot zones • Focus diversion efforts on low drug offenses in “<i>colleges in the west end, like Morehouse, Spelman, Clark Atlanta</i>”

Limitations

A few limitations to this report should be acknowledged. Firstly, the majority of stakeholders came from government and state-run agencies/offices. The perspectives from non-governmental organizations were not as plentiful and thus, underrepresented given the number of NGOs involved in PAD. Secondly, reports of level of policing were potentially skewed because police officers

“see a lot of attention being placed on the quality of life crimes, so...arrests are down right now, the jail population is way down...I think once you see a decrease in the violent crimes, in the property crimes, then you’ll probably see more police presence around the quality of crimes again.”

Even in light of its shortcomings, this report furnishes PAD staff with valuable and actionable information from the perspectives of initiative stakeholders to consider in evaluating strategies for improvement in the next phase of PAD. Many of these insights stem from observations about what has worked well in Seattle; others derive from stakeholders’ reflections regarding ideas and practices that have been less successful.

Implications

The first two years of the Atlanta/Fulton County Pre-Arrest Diversion Initiative pilot have already provided invaluable insight into bridging gaps between stakeholder understanding and behavior in order to achieve a common goal. Insights derive from stakeholders’ reflections on practices that have been challenging and strategies that have eased the process. The transformation of interactions between historically adversarial stakeholders demonstrated that storytelling, sharing programmatic results, and informing all stakeholders about participant successes provided a glimpse into how the program was operating from a variety of perspectives. Stakeholders bought-in deeper when they felt as though they had something of value to contribute to PAD success and were given the opportunity to share in the success. Atlanta’s PAD can serve as a model for other counties seeking diversion programs diverting arrest all together and as a comparison for similar ongoing pre-booking or pre-trial diversion initiatives as a potential measure of the unique value of *pre-arrest*.

PAD success long-term greatly hinges on continued strong organizational capacity and management. Mechanisms for monitoring, evaluating, and reporting on progress towards intended outcomes must be designed, implemented, and adjusted based on stakeholder feedback. It is crucial that PAD remains an independent entity, as its role in the initiative requires that PAD and its organizational priorities remain unbiased towards any one stakeholder. In coordinating strategies and actions across the criminal justice system, investments should support one or more organizations and/or agencies. Improvements are not only shared across the system, but traditional silos of information are torn down as a culture of collaboration rises.

Conclusions

Since PAD's inception, strides have been made in progressing the initiative, in large part due to the contributions of stakeholders. In fact, stakeholders were the ones who fought against the proposal of an expensive, exclusionary, and ineffective policy for solving the root problems leading to quality-of-life crimes. PAD builds a bridge to mutual-understanding between stakeholders that is traditionally impaired by structurally opposed relationships, perceived competing priorities, and negative pre-conceived notions around the "other." The initiative utilizes data and storytelling to inform stakeholder decisions, strengthen programmatic results through adaptation, and create lasting change in the communities they operate within. PAD is worth duplicating in other county's experiencing high rates of crimes related to poverty, substance abuse, or mental health, given planners consider conditions like resource capacity, geographic features, and demographic for their area. The Atlanta/Fulton County Pre-Arrest Diversion Initiative has demonstrated success in positively transforming relationships across stakeholder organizations, paving the way for alignment in their vision towards utilizing

rehabilitation through services instead of retribution through incarceration as an approach to improving public safety.

Additional Resource

- **LEAD® National Support Bureau:** The [LEAD® National Support Bureau](#) is a project of the Public Defender Association (PDA). PDA acknowledges our partnership with the Katal Center for Health, Equity, and Justice in the launch of the Bureau in 2016. The Bureau also draws on the expertise of prosecutors, police, case managers and community public safety leaders who are now using LEAD on the ground, and are willing to share lessons learned with their peers around the country.

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Appendices

Appendix A: Interview Guide

Interview Guide - Key Informant Partner Stakeholders

Introductions: “As a [partner/insert role] of PAD, we will ask you questions regarding your understanding of the initiative, including its goals and objectives, as well as your satisfaction with being a [partner/role].” Overview: I will be recording, I will ask that you sign this waiver (review the waiver together--specifically state that they can stop at any time and don’t need to answer specific questions if they don’t want to). This interview will be relatively unstructured, although I do have a few specific questions. The main goals for these interviews with partners (we will be interviewing about 10-12 partners) is to understand the ways partners are thinking about PAD, how it ties into their specific contexts, what they hope the initiative will achieve, and what suggestions they have for programmatic changes. We may be following up to do another interview at the end of the pilot.

Buy-in/Alignment w/PAD

1. What is your favorite part of your job/work? Least favorite part?

[Probes] How does this tie in with your work with PAD if at all? Set the tone for this to be relatively unstructured asking why, tell me more questions and probing for specific examples that illustrate their points.

3. Tell me about an experience with PAD (if there are any) that you saw as a success (and failure) based on your everyday goals? Long term goals? [Probe: How does PAD tie in to this? Or not.]

4. What is one thing that you don’t think PAD staff/partners understand about your work?

5. Tell me about a time (if any) when you did not understand PAD’s activities or goals.

Organizational/Organizing Landscape Context Questions

5. Tell me about some of the challenges/issues from your work that PAD can help to address. What’s an example?

6. Tell me about changes you’ve needed to make organizationally/in your work (or still need to make) in order to establish this initiative within [your context, e.g. APD]?

7. What organizational [or other setting e.g. movement space] factors do you think will help or hinder the program from achieving its goals?

8. How are officers/organizers/public defenders responding to PAD? Are they excited, resistant, etc? Please give me an example of supportive attitudes and unsupportive attitudes.

Follow ups: What are some political factors/forces that could impact the initiative? What is the political climate within [their setting] surrounding the initiative? What type of political pressures do you encounter? From whom do these pressures come? How might you define their motivation and goals?] Ask for examples.

9. Question for APD contacts, service provider contacts or others that work directly with PAD: What are the specific needs of [their community members directly involved--e.g. Service providers, police officers] in order to participate effectively?

10. What is an example of PAD success from your perspective?

11. What might long-term success look like (provide examples)? What are some factors that contribute to this?

Participants/Target Participants

12. Who are the PAD target participants in your perspective? Can you give me an example of a specific case? [*Looking to draw out beliefs and attitudes towards criminalization/harm reduction here. Keep this very open-ended*].

Possible follow ups: What are the specific needs of the target participants?

13. What (if any) are your specific concerns about certain groups (ask to define if they don't) of participants being involved in PAD?

14. Are there specific groups (if any) that you think PAD should or should not focus on?

Operational/Programmatic Feedback

15. How satisfied are you with your individual role with PAD? What would you change/keep the same?

16. PAD has been in operation for more than 6 months now. What programmatic improvements would you like to see made?

Follow up: Do you have specific feedback for PAD?

17. Is there anything we didn't cover today in our discussion that we should have?

18. What comments or questions do you have for me? Is there anything you would like me to explain? Is there anything this interview has brought up for you that you'd like to explain?

Appendix B: Process Evaluation Matrix (Stakeholders)

Evaluation Dimension in RFP	Saunders Process Evaluation Component	Determine	Construct	Dimensions	Why	Measure	Collection	Analysis
Stakeholder perceptions	Context	To what degree do stakeholders feel involved and invested in the initiative?	Affective stakeholder buy-in	Belief that all relevant stakeholders have had meaningful involvement in designing the initiative	If stakeholders don't feel meaningfully involved they will create conditions that can stifle PAD. If they do feel involved they can facilitate acceptance of PAD.	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Belief that the initiative has good staff who can implement it well	Stakeholders have to have confidence not only in the program, but in who is implementing it	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Belief that Atlanta has sufficient resources for the initiative to work well and sustainably	This also reflects buy-in. Stakeholders can say they like the program and staff, but if they don't say it's sustainable, or can be, maintaining or expanding PAD will be difficult	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
		To what degree do stakeholders feel the initiative is good for the neighborhood or Atlanta?	Cognitive stakeholder buy-in	Stakeholder perceptions that the initiative is more or less cost effective than current practice	If stakeholders don't feel it's any more cost effective than current practice they likely won't create conditions that are conducive for PAD	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Stakeholder perceptions that the initiative improves or devalues the neighborhood	Stakeholders may like the principle of PAD but oppose it for effects say on property values	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Perceptions that the initiative reduces or increases crime	This is going to be key. Stakeholders must feel PAD reduces crime if the program is to have any future	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Perceptions that the initiative improves participants' quality of life, and that this is a good thing	Stakeholders must believe that PAD does what it says it will do. They must also see value in PAD's goal to improve participant quality of life	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Confidence that the program ensures confidentiality for participants	Seattle has some concerns about this initially (e.g., 'program for snitches') and it has been raised as a concern in PAD design team meetings (e.g., care navigator interview being used to prosecute other crimes)	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process
				Perceptions that participant confidentiality does not hinder public safety or hobble prosecutors	If stakeholders see PAD as a 'protect a criminal' program they will oppose it	Twice yearly stakeholder key informant interviews	Program evaluators to collect	Open coding process

Appendix C: PAD Criminal Justice System Navigation Protocol

Operational Working Group

Pre-Arrest Diversion is a criminal justice initiative, and is only as effective as its partnership with criminal justice agencies in diverting and removing criminal justice system barriers. The PAD Operational Working Group is the initiative's implementing body and includes Atlanta Police Department, County DA and Solicitor and City Solicitor, and City and County Public Defenders. Other agencies on the OWG include additional law enforcement agencies and the Municipal Court, which may also provide information related to participant arrest history, cases, or other legal issues. Monthly meetings of agency partners are the opportunity to review active participant files and discuss relevant legal issues or barriers to their success. Criminal justice agencies and the PAD Care Navigation team will report out on any updates related to participants for discussion or troubleshooting with the group. The group may also discuss protocol or policy issues related to the overall success of the Pre-Arrest Diversion initiative.

Role of Law Enforcement

It is the responsibility of **law enforcement** to provide accurate and complete *Consent Forms* and *Field Interview Forms* for each completed diversion referral. These forms must include name, date of birth, and documentation of probable cause. Forms should be scanned and emailed before the completion of the shift in which the referral was made.

Role of PAD Team

It is the responsibility of the **PAD team** to upload the referral documents to Dropbox *within 24 hours* of the diversion, and to notify the OWG members that a new referral has been accepted. Within a 48-hour window, the PAD team will complete a legal intake form with the individual at the time of initial referral, and provide this form to the Atlanta Public Defender's Office for review; conduct a search of public court dockets and SO registries; and contact the appropriate Solicitor's office to request a records review. It is also the responsibility of the PAD team to maintain an active calendar of Participant's open cases and communicate with public defenders and prosecutors related to open cases, re-arrests, or other legal issues.

Role of Public Defenders

It is the responsibility of the **public defender agency** – with consent of the PAD participant – to identify if the diverted participant is a past or active client. Public defender agencies may also share past or present service plans or referrals, as well as provide assistance on legal barriers when possible (i.e. license reinstatement, child support, etc). Upon notification of a diversion referral and receipt of the Consent Form and FIF, **both Public Defender offices** will notify the PAD team as to the individual's status with their office and any immediate concerns or service considerations.

Role of Prosecutors

It is the responsibility of the relevant **prosecuting agency** to review diversions referrals *within 48 hours* of the referral and provide relevant information to the PAD team. Upon notification of a diversion referral and receipt of the Consent Form and FIF, **the assigned prosecutor** (based on the diverted charge) will look up the individual's information and provide information on arrests, convictions, open cases (with jurisdiction). The prosecutor will then work with the PAD team to address outstanding legal concerns, with the goal

of minimizing barriers and supporting participant's successful connection to services. This may include case dismissal, continuance, and sentencing/conditions of sentencing recommendations.



Atlanta/Fulton County Pre-Arrest Diversion Initiative

Care Navigation Protocol Version 3

INTRODUCTION AND OVERVIEW

A New Approach to Community Safety & Wellness

The Atlanta/Fulton County Pre-Arrest Diversion Initiative aims to redirect people out of the criminal justice system who would be better served by social services. It seeks to reduce the number of people in our courts and jails whose involvement is primarily due to unmet mental illness, substance use disorders, or extreme poverty. By replacing detention with services, it will increase neighborhood safety, improve the quality of life in our communities, and expand the quantity and quality of needed social services in our city and county.

The Care Navigation process is a critical component of the pre-arrest diversion model. The overarching goal is to reduce stigma, criminalization, and barriers of persons served. The objectives of the program are:

- To provide appropriate case management and support services;
- To address basic physiological needs, such as food, water, and shelter;
- To link participants to community based programs and services;
- To assist participants with securing or increasing their income and/or employment;
- To encourage participation in life skills development, financial planning, and support groups.

Services are designed and implemented to support individuals to:

Achieve recovery, health, and well-being;
 Enhance quality of life;
 Gain sustainable income;
 Identify stable housing solutions;
 Connect to others and thrive.

PRIORITY POPULATION

An individual is eligible for the program when there is probable cause that that individual has committed an offense for which they could be arrested and where the officer discerns their behavior is related to unmet mental health needs, substance use/misuse, and/or extreme poverty. The priority population of those eligible include:
 Individuals who have had multiple contacts with the criminal legal system and are at high risk of recidivism;

Individuals typically excluded or underserved by existing programs (including trans people, people experiencing homelessness, immigrants, and people with HIV);

Individuals who are impacted by racial disparities in policing, arrests and, sentencing.

WHAT IS DIVERSION (See Operational Protocol for law enforcement procedures)

Diversion is the act of changing course from one direction to another:

Police officers utilizes their discretion to divert an individual whose offending behavior may be driven by drug dependency, mental illness, or poverty/homelessness away from the criminal justice system and towards community-based, , comprehensive case-management;

Diversion is made at the pre-arrest stage bypassing the costs and time entailed in booking, processing, and incarceration;

Diversion is not a separate “program” but rather a part of an entire system of social services and justice agencies problem solving. Instead of blame it is solution focused;

Diversion should always be safe and appropriate for the participant;

Diversion linkages are based on the individual (needs, assets, barriers, desires, professional recommendations, and strengths are all take into consideration);

Diversion requires a harm reduction approach that is rooted in a housing first, trauma informed care, and cultural awareness modalities.

PILOT BOUNDARIES AND SCHEDULE

The Atlanta Fulton County PAD Initiative (PAD) pilot operates in in APD Zone 5, Beats 505, 508, 509, 510, 511, and 512; and Zone 6, Beats 603 and 604.

Pre-Arrest Diversion referrals calls are currently accepted Tuesday and Wednesday, 8am-2pm; Thursday 3 pm – 9am; and Friday evening into Saturday morning, 7pm – 5am. Hours may change at the discretion of PAD with input from the Operational Working Group.

Although, the pilot area and schedule are limited, PAD seeks to train as many, Atlanta Police Department officers and other law enforcement personnel in Zones 5 and 6, as possible. The ultimate goal is to promote by in, cross training support, and influence a cultural shift with-in the department.

CARE NAVIGATION TEAM

Atlanta/Fulton County Pre-Arrest Diversion Initiative – The PAD Initiative is an independent non-profit entity that is responsible for the administrative management of the Pre-Arrest Diversion program. The PAD Operational Protocol describes the general responsibility of the program staff. Staff responsibilities related to the Care Navigation process are described below.

The *Executive Director* (ED) is responsible for staffing the Operational Working Group and Policy Advisory Committee. In this process, the ED serves as the conduit and liaison to implementing criminal justice agencies (prosecutors, law enforcement and public defenders). The ED also responds to grievances and concerns at the highest level, which may include facilitating PAD Board of Directors involvement.

The *Social Services Director* (SSD) is responsible for supervising the overall care navigation process. This includes, overseeing and/or developing protocol for service delivery, guiding and supporting case management functions, and responding to grievances and concerns. The SSD is also responsible for recruiting service providers to join the PAD network partnership designed to give PAD participants various options along the *continuum of services* needed. The SSD seeks to establish formal agreements with network partners that agree to support the principles and philosophy of PAD.

The *PAD Care Navigator* (CN) is responsible for responding to diversion referrals (in a 2-person team), completing intake assessments, and provide on-going comprehensive case management services. Case Management services may include assisting with immediate needs, providing guidance to participants in establishing and achieving individual goals; identifying and linking participants to appropriate community based resources. The CN is also responsible for outreach designed to build a rapport with diverted individuals, law enforcement officers, Network Partners, potential participants and the community at large.

The *PAD Resource Specialist* (RS) is responsible for direct and indirect care navigation support. This includes, providing bridge support to participants by ensuring resources, advocacy, mentoring, and follow-up is available in the absence of, or in conjunction with, care navigators. The Resource Specialist maintains a guided resource list that the Care Navigation Team uses to identify appropriate options along the *continuum of services* needed. The RS works closely with

and on behalf of the Care Navigation Team in outreach efforts most specifically to ensure lines of communication and collaborative efforts are ongoing and collegial.

The *PAD Liaison Officer (LO)* is a law enforcement officer designated to be a point of contact to the arresting agency. The LO works closely with the Care Navigation team to educate officers in appropriate diversion referral protocol, promote and celebrate program successes, and identify challenges arising during the initial referral process. The LO also proactively monitors police radio communications to identify and encourage potential referrals. Upon completion of a successful referral, the LO will work with diverting officers to ensure timely submission of documents and HORIZON history reports on a point-in-time and weekly basis. Ideally, there will be a liaison for each zone represented in the diversion and care navigation process.

PROGRAM STRUCTURE

Scope of Services

The Atlanta/Fulton County Pre-Arrest Diversion Initiative is designed to provide linkages with a warm hand off and on-going care coordination to wrap around services for persons diverted from arrest. The core service model is to meet the needs of the increasing numbers of individuals of marginalized communities that are committing survival crimes or other infractions driven by mental illness and/or substance use disorders. The Care Navigation team is comprised of persons with varying degrees of education, certifications, and experience, including lived experience. Lived experience related to mental illness, substance use/misuse, sex work, homelessness, incarceration, and other life experiences, are recognized as valuable sources of connection and expertise, and are integral part of the PAD Care Navigation model.

To achieve this the team will utilize motivational interviewing techniques to engage in dialogue, affirm, establish a positive rapport, and inspire a willingness to change. The PAD Team will make face-to-face contacts, provide general resource information, and offer assistance to resources connection. Outreach will use both a fixed and mobile approach to meet participants “where they are” and begin moving them towards a “readiness to change.” As an incentive, the PAD Team will provide various forms of life skills supportive tools to assist participants along the way. This may include food, clothing, hygiene items, transportation.

The PAD Care Navigation Team seeks to support the individual in making healthy and safe decisions. In addition providing resource to meet immediate needs, the team will assist with identification related purchases, including copies of birth certificates, and medication purchase assistance. As a participant increasingly demonstrates a willingness to work with the Care Navigators, The Care Navigator will use the Individual Service Plans (ISP) developed in partnership with the participant. CN will *link to* community based mental health and substance treatment services; *link to* healthcare providers for medical services; *link to* self-help groups (NA, AA, CA, DTR), *link to* income resources including employment or benefits entitlements, access temporary and permanent housing resources (reunification, transitional housing, permanent or permanent supported housing); and *link to* legal support services. The Continuum of Services flow chart provides an outline of potential services referral entities. The team will seek to present potential linkage options for the participants that support their desired outcome.

Where possible, PAD Team members will seek to identify and refer participants and those encountered in outreach to programs and services that are at no or limited costs. SSC will seek to establish agreements with social services providers to negotiate reasonable payments for mandatory fees. The PAD Team will assist diverted individuals with obtaining proof of income, as needed. Participants will be expected to provide payments for external services where appropriate, if they are able to pay.

Case Management

PAD uses a flexible case management approach that is based on the needs of the individual served. PAD implements evidenced based practice models of intervention that are comprehensive, intensive, complex, targeted and most importantly based on principles of harm reduction. We believe the evidence-based practice of harm reduction is the pillar of optimal service delivery. It lends to good customer service, reduces stigma, and increase long-term positive affects for the participants.

The goal of comprehensive case management is to address needs for concrete services such as health care, entitlements, housing, and nutrition, as well as develop the relationship necessary to assist the persons served in addressing other issues including substance use, mental health, and domestic violence in the context of their family/close support system.

Keeping a housing first approach at the forefront the goal of a team-based Intensive Case Management (ICM) approach is to help persons served maintain their housing and achieve an optimum quality of life through developing plans, enhancing life skills, addressing health and mental health needs, engaging in meaningful activities and building social and community relations. It is an evidenced-based practice.

A targeted case management strategy engages new participants immediately and is designed to be solutions focused based on a participant's assets and identified needs. According to [Pennsylvania's Health Information website \(social.solutions.com\)](https://social.solutions.com), targeted case management (TCM) is any "direct assistance to adults and children clients in the behavioral health system, including problem resolution, advocacy and referral to other appropriate services."

Care Navigator will assist with access to community based services. Targeting a service plan based on the identified barriers in conjunction with participants communicated desires helps to streamline service coordination and referrals. Participants with histories of mental health, substance use disorders, or co-occurring disorders may be referred to collaborating support projects throughout the community for inpatient/outpatient treatment, support group meetings, and sponsor support. The goal is to pace the support along the way always using motivational interviewing, trauma informed care, and culturally competent awareness strategies.

Time and resources are provided to each participant, with the intent of cultivating a spirit of independence and self-determination. When ready, the program encourages participation in job readiness programs that include resume writing, skills building, interview preparedness, and computer application assistance. Participants will have the opportunity to take steps forward, with additional offerings and connections to supported instruction. The instruction may include

life skills, budgeting, parenting, and mentoring. The ultimate goal is to empower the participant to reduce barriers and establish positive relationships by focusing on asset, thus increasing personal strengths.

Justice System Navigation

Operational Working Group

Pre-Arrest Diversion is a criminal justice initiative, and is only as effective as its partnership with criminal justice agencies in diverting and removing criminal justice system barriers. The PAD Operational Working Group is the initiative's implementing body and includes Law Enforcement, Prosecutors (including County DA and Solicitor and City Solicitor), and Public Defenders. At monthly meetings, the Care Navigation team presents new diversions to the criminal justice agencies in order to discuss relevant GCIC history (provided by agency on request) and active cases or other legal issues. The role of the Care Navigation team at these meetings are to serve as advocates for PAD participants.

Prosecution & Defense

Prosecutor and Public Defender representatives both at city and county levels provide legal representation, prosecutorial review, advocacy and/or case management support for participants that may have been arrested after being enrolled in PAD services. This often opens up opportunities to attend first appearances, hearings, and potentially trials to advocate for PAD participants. The Care Navigation team is responsible for contacting agency partners regarding current legal issues and/or re-arrest in order to advocate for participants with these agencies. As appropriate, PAD Executive Director and Social Service Director will facilitate conversations with these agencies.

Law Enforcement

Police officers are the first point of contact for PAD participants, with the ability to divert at their discretion. The Care Navigation team has a critical role in building and maintaining relationships with line officers and supervisors to promote respectful and resourceful officer interaction with potential PAD participants. The Care Navigation team will make every effort to get to know all officers working in the pilot area during diversion hours, and serve as a resource and support to officers in addressing community needs and attempting referrals.

Provider Resources and Partnerships

The hallmark of the PAD Care Navigation is to work with a network of community partners to provide services that are client-centered, strength-based, and harm-reduction focused. PAD will establish Memorandums of Understanding (MOU) with community providers to ensure a reciprocal partnership and by in to the guiding principles of PAD. (See attached template)

PAD will host orientation, networking, and training events for direct service providers who are members of our Partner Network.

Recruitment

PAD hosts a quarterly orientation for service providers that are interested in partnering with our Care Navigation team. While PAD seeks to establish formal agreements as appropriate, partners do not need to sign an agreement to accept referrals from PAD. Potential partners complete an interest survey, at the conclusion of the orientation. The goal is to garner insight on desired partnership level, interest in trainings, and appropriate contact for follow-up. The PAD team is acquainted with the potential partner organization, builds rapport, and provides additional information about PAD and the desired expectations of a partnership during site visits.

PAD also maintains a database of providers and a resource book with updated literature on possible resources.

Training

PAD provides training on the following topics:

Harm Reduction

Housing First

Motivational Interviewing

Trauma Informed Responses

Cultural Competency Awareness (including related to race, gender, age, gender identity and sexual orientation)

Science of Addiction (SUD training)

Others as identified by partners

Networking

PAD hosts quarterly networking sessions where partners can have a safe space to give feedback on their experience with PAD, share ideas about what is working and where there are challenges in the supportive services continuum, and provide updates on individual programs. In addition, PAD will “meet (partners) where they are” and provide one-on-one supportive guidance.

The Care Navigation team will work collectively with Network partners to:

Assist participants in gaining entry into service programs;

Develop a network of housing resources, and assist the participant in gaining access to appropriate housing;

Advocate for participants with PAD partners and a wide variety of other service providers;

Identify gaps and barriers in available community resources and advocate for systemic changes.

Housing First

In addition to connecting participants to emergency shelter, one of the core principles of PAD is Housing First. The objective is to provide supportive services to help participants obtain housing stability.

PAD is a member of the Atlanta Continuum of Care, facilitated by Partners for Home, and works within the coordinated entry process. PAD seeks to utilize the following resources to refer qualified applicants and/or obtain information to assist persons with housing barriers to obtain stable housing:

Permanent Supportive Housing – provides three different permanent housing options, with ongoing supportive services, for those with a disabling condition.

Rapid Re-housing – provides short term rental and utility assistance to those with less significant barriers, such as poor rental history, utility debt, or underemployment. Continued supportive services such as case management and employment assistance are offered throughout the duration of the participant's program enrollment.

Tenant Based Rental Assistance (TBRA) – provides longer term rental assistance to those with little ongoing ability to maintain housing without assistance. The participants served through this program choose their housing location, and pay a portion of their income toward their monthly rent.

Section 8 – Housing Choice Voucher program that allows private landlords to rent apartments and homes at fair market rates to qualified low income tenants, with a rental subsidy administered by Home Forward.

Georgia Housing Search – to identify permanent housing solutions within the participant's desired parameters.

Georgia Housing Voucher – permanent housing option provided any the state administered through DBHDD for chronically homeless persons with severe and persistent mental illness

HOPWA – housing opportunity for persons living with AIDS or HIV.

CARE NAVIGATION PROCEDURE

Referral Call Response

APD officer from select Zone 5 or 6 beats will utilize discretion to refer individuals to the PAD program. The Care Navigator or responding team member will utilize a call log form to document the call. It is important to complete the form as thoroughly as possible to track diversion attempts and triage whether the attempted referral is in fact an eligible diversion. Once completed the log should be submitted for data entry and filing.

An eligible diversion referral must demonstrate probable cause for arrest; be associated with behaviors that are affected by mental health, substance use/misuse, and/or quality of life/poverty concerns; and individual must be able to consent to services.

A non-eligible diversion referral may be due to not meeting minimum age requirements (17+); individual is actively experiencing a mental or physical health *crisis*; is unable to consent to diversion; is actively violent or abusive; presents with pending exclusionary charges or warrant (eg. Operational Protocol for exclusionary criteria detail).

In the event of a referral call during non-diversion hours, for an interaction that is outside of the pilot area, or at a time when the Care Navigation team is not available, the diversion attempt should be noted. In addition, the referring officers should be reminded of diversion schedule (where applicable), and provided resources to share with individual for future use.

Most calls will come to the diversion hotline number (470891-4855), however some may call main office line or work cells. All are acceptable forms of communication. If call appears to be a divertible referral the Care Navigation team shall gather *initial screening documents*: extra copies of consent, liability, and referral screening form.

On the Scene

At the conclusion of the referral call, the Care Navigation team will drive the PAD Mobile to meet the referring officer and individual on the scene. If the Care Navigation team is unable to meet the officer within the 30-minute timeframe, the team will inform the officer as early as possible that they cannot accept the referral at this time.

Upon arrival the Care Navigation team greets everyone on the scene, then seeks to engage the referring officer and the potential participant independently. In this initial interaction, each Care Navigator is establishing rapport and seeking to verify eligibility of the individual referred. Page 2 of the intake screening form should be prepared at this time to verify or note behavior associated with referral and confirm probable cause.

Referring officer should have a signed consent form completed. However, it is acceptable to have this done on the scene, as long as, officer explains the referral by reading the script to the individual and individual being referred is able to acknowledge understanding and provide signed consent. The referring officer should retain the copy of the consent form and submit with copy of Field Interview Form (FIF) also noted as contact form.

If individual is found to be eligible and agrees to participate in PAD, page 1 of the intake screening form should be completed. Individual's signature serves as preliminary enrollment. Liability form should also be signed before transporting. Resource consideration should begin at this point.

Extreme care should be taken during the warm hand-off process. Diverted individuals should not be accepted if they are extremely agitated/volatile.. The Care Navigation team has the right to try to de-escalate and determine if a participant is ready to initiate services at the time of referral. Care Navigators work in pairs during diversion hours, and should both agree to accept the diversion referral. If at any point during diversion the team feels unsafe, they should communicate such with the referring officer, liaison officer, and supervisor. When possible, during diversion, intake, or subsequent meetings, the team should determine if diverted

individual requires medical attention or crisis intervention services. The team should never try to hold, detain, or block individuals against their will.

Initial Intake

Participants physiological needs should be addressed with a meal and drink. This can be discussed and obtained before or after arrival to PAD offices.

Assigned Care Navigator will initiate and seek to complete participant intake paperwork within 30-45 minutes. See the attached check-list that outlines the documentation to be completed. (Blank packets should be printed and stored in advance). **CN should not meet with diverted individual behind closed doors during the initial interaction.**

While assigned Care Navigator is conducting orientation with new participant, team member should initiate emergency resource plan, which may include a safe place to stay, provisions, hygiene items, clothing, shoes, under garments and/or blanket (based on expressed/assessed need of the participant). **(Please call emergency housing provider in advance to determine availability of resource).**

Care Navigator should inform participant that a background check regarding any sexual offense history will be conducted on the Local Sex Offender Registry and the U.S. Department of Justice National Sex Offender Public Website (NSOPW). Care Navigators are to explain that if the diverted individual is on the registry, they are not excluded from receiving services of the Pre-Arrest Initiative. However it is critical to know this information to make the appropriate referrals for services.

If desired, provide transportation to placement; visit Care PAD for available resources, place emergency order, and/or shop for specific items. Timing is critical: the entire intake process should take no more than 2 hours.

Participant should be given a reminder card that indicates care navigator schedule of availability, follow-up date(s) and plan, and contact information.

Care navigator will note contact on engagement log and highlight every subsequent contact thereafter. This includes, contact and/or communication directly with or on behalf of participant. Engagement updates will be due weekly at the close of assigned shift.

Care Navigator will submit all documentation to participant file within 24 hours of creation/update.

Care Navigator will prepare status updates to be shared verbally at the monthly Operational Working Group meeting, and will provide written status updates monthly or as requested by PAD staff or partners.

Week 1-2:

Second contact should be attempted within 24 hours of diversion. Face-to-face preferred, but phone is acceptable. This is an additional opportunity to build rapport and ensure participant has a hopeful mindset. Also, this allows time to ensure participant understands program and communicates any immediate needs. Additional contacts may be necessary depending on the specific needs of the participants.

Intake enrollment data should be input into the HMIS database within 72 hours of diversion. All subsequent contacts should be updated weekly.

Participant should be invited back to the office the second week of Care Navigation to meet the entire PAD Team. During this contact the Assigned Care Navigator will:

- Introduce self and team, explain care navigation members roles;
- Provide additional contact numbers of team members as appropriate;
- Describe what a crisis is, discuss protocol on what to do and who to call in an emergency;
- Develop ISP goals/care plans: Care Navigator will work with the participant to prepare an individual service plan to use as a working document to establish goals and monitor progress. ISP must be signed by the participant;
- Discuss scheduling and potential visits;
- Complete additional paperwork and obtain signatures, where needed

PAD Team members may visit participant where they are, if it is more convenient. Assigned Care Navigator or designee should communicate with referred partners weekly. *Release of Information should be in place for all partner referrals.*

Week 3-4

Weekly team meeting should occur to discuss participant progress and linkage to additional resources. This should be documented on Team Meeting Note and handed in weekly;

Baseline evaluation should be administered within the first 30 days of service;

SSD will begin hard and soft file review assessments to note necessary adjustments;

Week 5-6

Care Navigator will conduct a minimum of one 1:1 face-to-face weekly session with each participant assigned;

Care Navigators should use this time to work on ISP goal development and identify additional items participant may need to address;

Care Navigator will work with participant to update care plans every 30 days;

On-going Subsequent Weeks

On a quarterly basis members of the PAD team will discuss with referral sources (providers, partners, and community leaders) ideas to enhance connection, insight on PAD processes, overall participant experiences;

Assigned Care Navigator will check-in with referral partners on a weekly basis to review participant's progress and to ensure continuity of care. CN, partner and participant should meet in person for a progress staffing, as needed. (During this meeting community linkage should be discuss. Lines of follow-through should be clearly established.

Care Navigator will follow-up on disciplinary actions issued by provider agencies.

Care Navigator will submit recommendations for corrective action to partner agency Case Manager/Programs Director.

Care Navigator will submit recommendations for extensions to the partner agency Case Manager/Programs Director.

Care Navigator will update required Participant Track fields per Housing Support Standards.

Evaluation committee will begin administering follow-up surveys 6 months after enrollment in subsequent intervals. Care Navigation team will assist with logistics and connection.

INITIATIVE OBJECTIVES

Successfully Divert 75 participants annually.

Care Navigation goal is to accept 2-4 participants/week, or 6-8/month.

Achieve measurable progress in reducing risky behaviors and changing attitudes about these behaviors, increasing safe practices, and increasing engagements with support systems as it relates to mental health, physical health, sex work, trauma and substance use/misuse.

Participants will experience a 50% reduction in criminal justice contact.

80% of participants will establish a care plan; progress on care plans will be noted quantitatively and in narrative form.

60% of participants with behavior health challenges will be referred to recovery supports to include treatment, counseling, support groups etc.

50% will complete appointment

30% will consistently engaged in recovery support services

50% of participants will have improved housing stability

20% will have permanent/permanent supportive housing

30% of the participants will have obtained or increased income

PROGRAM POLICY

Complaints

In the event a participant feels that the boundaries of the PAD/participant relationship have been breached or has a complaint regarding services, the following steps may be suggested:

Contact PAD's Social Services Director at (470) 685-0088 or shedra@prearrestdiversion.org, or [in-person at the PAD office](#)

[If the complaint involves Social Services Director, participant may contact PAD Executive Director at 470-819-4852 or \[moki@prearrestdiversion.org\]\(mailto:moki@prearrestdiversion.org\) or in person at the PAD office](#)

All complaints will be documented and maintained in a locked office at the PAD offices along with other supporting documents. All complaints will be preliminarily investigated by an interview between the participant and SSD. The SSD and the Executive Director will determine course of action regarding the specific complaint and if additional investigation is required. Only PAD staff with direct involvement in the incident will have access to the confidential documents which relate to their involvement levels. No disciplinary or corrective actions may be initiated against participants who lodge complaints.

Equal Participation of Religious Organizations

PAD will not and does not engage in inherently religious activities or require participation in inherently religious activities, such as worship, religious instruction, or proselytizing, as part of programs, activities, or services. PAD does not and will not discriminate against a program participant or applicant on the basis of religion or religious belief. PAD does not and will not use funds to support any inherently religious activities, such as worship, religious instruction, or proselytizing.

Fair Housing/Non-Discrimination

PAD does not maintain housing units. However, it is the policy of the PAD Initiative to fully comply with all federal, state and local nondiscrimination laws and to be in accordance with the rules and regulations governing fair housing and equal opportunity in housing and employment. This includes upholding PAD's legal obligations to homeless families.

Specifically, PAD and its staff shall not deny services to any participant on account of race, color, gender, sexual orientation, religion, creed, national or ethnic origin, age, family, or marital status, handicap or disability.

Further, the PAD and its representatives or agents shall seek to identify reasonable accommodations in rules, policies, and services to give persons with disabilities equal opportunities to participate in the program and to occupy and enjoy full use of housing units participating in the program. Although PAD has a priority population, all disabilities will be considered dependent upon availability (see tenant selection criteria section).

Non-Discrimination

PAD is an equal opportunity employer. PAD's Equal Opportunity Policy states:

"...It is our policy to afford equal opportunity for employment and ensure that employees are treated equally without regard to race, color, religion, sex, national origin, sexual orientation, age, qualified handicap or status as disabled or Vietnam era veteran or Iraq veteran or

Afghanistan veteran. All persons shall be treated equally in all matters of employment such as hiring, transfers, promotion, demotions, recruitment, training, advertising, layoff or termination, rates of pay or other forms of compensation and benefits.

All employees are expected to follow and support this policy in dealing with guests, participants, volunteers, visitors, and fellow employees. Any employee violating this policy may be subject to disciplinary action up to and including discharge.

If you have any questions or concerns regarding equal employment opportunity, you should: Use the normal Communication Procedure

PAD staff are required to comply with PAD's policy of non-discrimination, listed above. PAD staff may not discriminate against any callers, interested persons, participants, or former participants based on race, color, religion, sex, national origin, sexual orientation, age, qualified handicap or status as a veteran, familial status, limited English proficiency, or persons with hearing, visual, or other communication-related disabilities. Discrimination by PAD staff will not be tolerated, and any staff member who violates this policy may face disciplinary action, up to and including termination of employment.

Reasonable Accommodation

PAD serves persons with special needs, such as mental and/or physical disabilities, histories of chronic use of alcohol and drugs and/or who may be living with disabling health conditions. PAD helps persons with special needs access and retain quality affordable housing.

“Federal law prohibits discrimination against persons with disabilities and requires all landlords to provide reasonable accommodation for tenants’ disabilities. The Fair Housing Act, as amended in 1988, prohibits all housing providers from discriminating against people with disabilities, including psychiatric disabilities. A housing provider violates the Fair Housing Act when it ‘refuses to make reasonable accommodations in rules, policies, practices or services, when such accommodations may be necessary to afford such person equal opportunity to use and enjoy a dwelling...’ unless such accommodation will fundamentally alter the provider’s program or cause an undue financial or administrative burden. Similarly, Section 504 of the Rehabilitation Act of 1973 prohibits all federally funded entities from discriminating against any otherwise qualified individual ‘solely on the basis of his or her handicap,’ and includes an implicit requirement to provide reasonable accommodation.”

Persons living with disabilities are legally entitled to accommodation if they need it in order to have the full use and enjoyment of their housing. PAD serves persons with special needs, such as mental and/or physical disabilities, histories of chronic use of alcohol and drugs and/or who may be living with disabling health conditions.

PAD responds to requests for reasonable accommodations in all aspects of our programs and services to assist those we serve regardless of their need. Therefore, Care Navigators will pursue multiple accommodation options..

Confidentiality

In the course of performing our duties, PAD Team members will come in contact with information and material related to referrals and participants which may be highly confidential. Confidential information may not be released or discussed with anyone outside of PAD except in limited circumstances, discussed below, nor discussed or made available to anyone inside the PAD organization that does not have a clear and specific need to know in order to carry out his or her workplace responsibilities. Care Navigators may discuss participant information with other team members on a “need to know” basis, such as for assistance in formulating case management plans for participants. Care Navigators must obtain specific releases from applicants and participants to discuss their application or status with landlords or other persons. Applications, participant records, files, and other information must be kept in a locked filing cabinet when not in use. Case managers may not leave applications, participant files, or participant records unattended on their desks. Violation of this policy may result in immediate discharge.

Participant confidentiality may be limited or broken under the following conditions:

Staff has a reasonable cause to believe that a child under the age of 18 is being subjected to physical or sexual abuse, neglect, or exploitation;
 Staff has reasonable cause to believe that a participant may cause harm to him/herself or to others; and
 Court order or subpoena

In cases of suspected child abuse, neglect, or exploitation, staff are mandated by Georgia law (19-7-5) to report that suspected abuse to the DFACS office in that county. Persons who have reasonable cause to suspect abuse are immune from civil or criminal liability if the report is made in good faith.

Threats of harm to self or to others may also be reason to limit or break participant confidentiality. Staff should assess 1) how severe the plan is; 2) how lethal the plan is; 3) does the participant have access or the means to carry out the plan. If staff feels that there is clear and present danger to the participant or others, participant confidentiality may be breached and, based on the threat, call 9-1-1, the local Community Service Board, Georgia Behavioral HealthLink, or may also need to alert the person being threatened.

Conflict of Interest

PAD’s Conflict of Interest policy for all PAD employees is as follows:

You are expected to conduct yourself at all times in a manner consistent with the best interests of PAD. This applies particularly to your associations with other employees, volunteers, guests, and suppliers. Personal activities or involvement from which personal benefit or obligation may potentially result should be avoided as it may create, or appear to create, a conflict with your responsibility and loyalty to PAD. Before accepting any gifts, gratuities or other items from co-workers, suppliers, participants, or guests that would be considered by any reasonable person to

be of more than nominal value, you should first contact your supervisor. Prior to engaging in outside employment, please discuss it with your supervisor.

Further, no employee, agent, consultant, officer of PAD who exercises or has exercised any functions with respect to Housing assisted activities, may obtain a personal or financial interest or benefit from any Housing activity, either for himself, herself, or for those with whom he or she has family or business ties during his or her tenure or for one year thereafter, except as specifically addressed in the Housing regulations. Housing case managers and the program director are required to sign the HUD Staff Certification of Eligibility for Housing Assistance verifying that no staff member is related to a program participant in any way and will receive no financial benefit from the eligibility determination.

In procuring services, equipment, supplies or other property with HOUSING funds, PAD is required to comply with 24 CFR 84.42.

Records and Reports

Complete and accurate information PAD be kept regarding participants, participant rental share, leases, bills, payments, etc. (as applicable) with which to complete timely reimbursement requests and required reports to funders. All records and files PAD be kept for a minimum of seven years as with standard protocol.

HMIS/Client Track

The Pre-Arrest Diversion Initiative is a member of the Atlanta Continuum of Care Coordinate Entry organization. Federal regulations require that CoC involved agencies enter information about programs and services provided to homeless and indigent persons into a Homeless Management Information System (HMIS). The chosen entity for Georgia is called Client Track. Aggregate information will be used to complete Annual Performance Reports. All persons expected to enter, review, and/or pull data from Client Track are required to complete new user and confidentiality training. Only authorized users, who have completed the training, may enter or access information in the Client Track system.

Authorized users may access and enter data once a participant is enrolled if their information is found in the HMIS system. However, information of persons for whom PAD does not find already entered in the system, a "Client Consent to Share" form must be signed. All persons who are 18 years or older and included in the household PAD sign their own form. The head of household should list all children under 18 residing in the household, date(s) of birth, and sign the Family Authorization form. Signed copies of the authorization forms must be maintained in participant files.

APPENDIX

Participant Referral Intake Screening Form

APD/PAD Consent for Referral Form

Sample Atlanta Police Department Field Interview Form (FIF)

Participant Intake Packet

Consent to Have Photo/ID/SS Taken

Acknowledgment of Rights and Responsibilities

Georgia HIMS Collaborative Client Consent to Share Information

Georgia HIMS Collaborative Client Consent to Share Information (supplemental: restrictions, as needed)

Release of Information: Authorization for Transfer of Information

Release of Liability Form

Consent for Emergency Treatment

Release of Info: Emergency Contact Form

Release of Information: Locator Consent Form

Individualized Service Plan

Participant Progress Notes

Medication log (as needed)

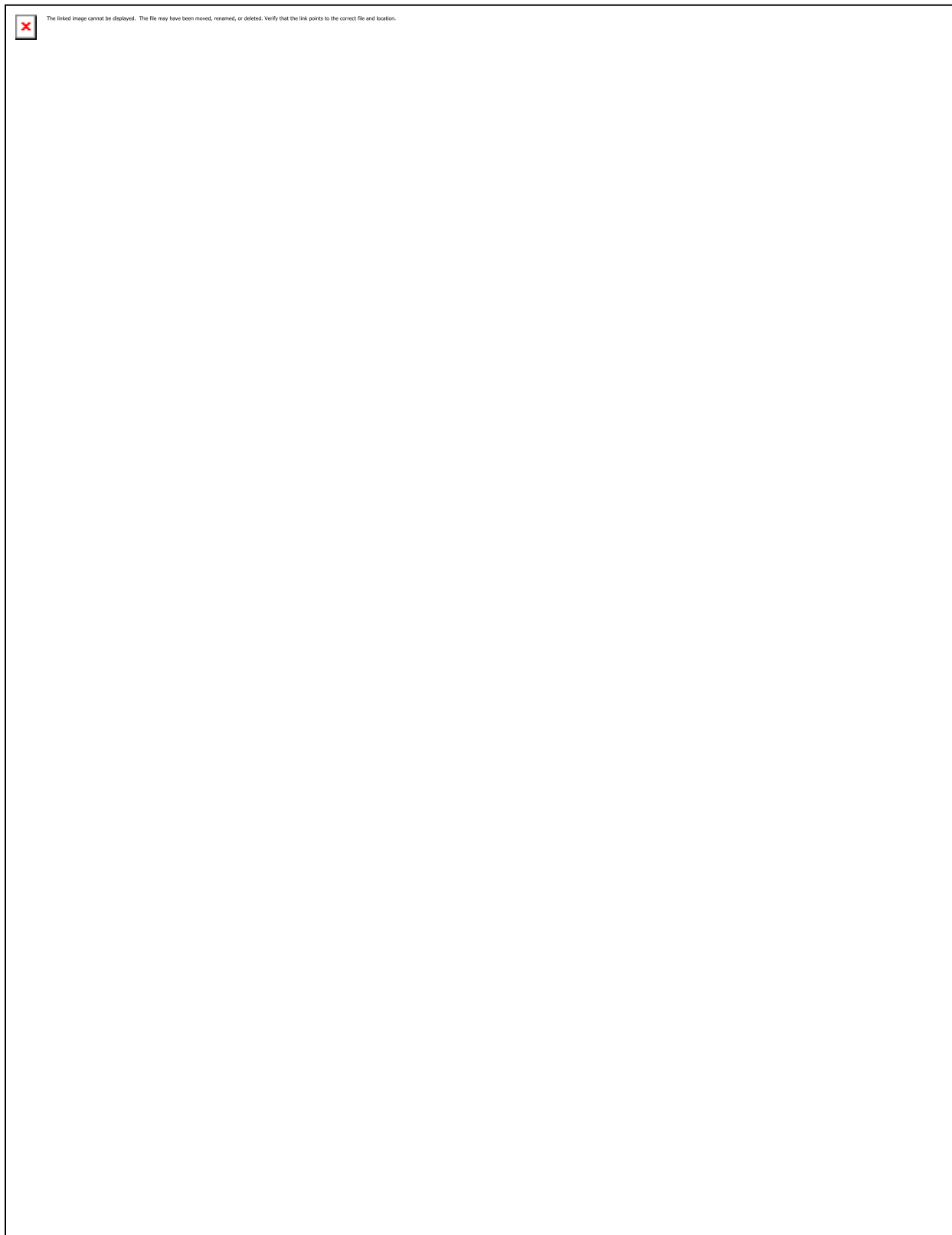
Motel Agreement (as needed)

Sample Continuum of Services

MOU Template

Resource Allocation Coding (excludes figure)

Appendix E: Atlanta/Fulton County Pre-Arrest Diversion Initiative - Memorandum of Understanding



Appendix F: Atlanta/Fulton County Pre-Arrest Diversion Initiative - Operational Protocol



**Atlanta/Fulton County
Pre-Arrest Diversion
Initiative**

Operational Protocol

(VERSION 1.2 – Updated 12/5/2018)

Operational Protocol

PILOT BOUNDARIES AND SCHEDULE

The Atlanta Fulton County PAD Initiative will be piloted in APD Zones 5 in beats 505, 508, 509, 510, 511, 512, and APD Zone 6 in beats 603 and 604.

Pre-Arrest Diversion referrals will be accepted on Tuesday, Wednesday, and Thursday during the hours of 10:00am – 8:00pm, and Friday during the hours of 7:00pm-1:00am Saturday morning.

PROGRAM OVERSIGHT

Operational Working Group – The Operational Working Group is made up of the implementing agencies, including the Atlanta Police Department, the Fulton County District Attorney’s Office, the City of Atlanta Solicitor’s Office, the Fulton County Solicitor’s office, City of Atlanta Law Department, the City of Atlanta Public Defender’s Office, the Fulton County Public Defender’s Office, and the Atlanta/Fulton County Pre-Arrest Diversion Initiative. This workgroup is responsible for developing and amending the referral and diversion protocols, approving RFPs for service providers and evaluators, staffing program participants’ cases per the Protocols, and for providing regularly scheduled reports and opportunities for input from the Policy Advisory Committee.

Policy Advisory Committee – The Policy Advisory Committee is made up of community stakeholders, policymakers, former PAD participants (once available) and other subject-matter experts. This Advisory Committee is responsible for reviewing and providing feedback on the referral and diversion protocols for PAD candidates, and participating in regularly scheduled meetings with the Operational Working Group. The group is also responsible for making criminal justice and human services system data available for comparison and evaluative purposes, and providing policy guidance for the PAD program’s operation and evaluation.

Service Provider Network – The Service Provider Network is made up of service providers which have service agreements with the PAD initiative to provide services to PAD participants using a model that is housing first, harm reduction, and trauma informed/culturally competent.

Law Enforcement Subcommittee – the Law Enforcement Subcommittee is comprised of Atlanta Police Department and other law enforcement personnel who are specially trained in PAD intake and referral procedures. This Subcommittee is responsible for reviewing and providing feedback on the Operational Protocol and for making recommendations to the Operational Working Group as PAD is developed and implemented.

PROGRAM STAFFING

Atlanta/Fulton County Pre-Arrest Diversion Initiative – The PAD Initiative is an independent non-profit entity that is responsible for the administrative management of the Pre-Arrest Diversion program. The following staff will staff the initiative:

The *PAD Executive Director* is responsible for supervising staff and partnerships, strategic planning, tracking and documenting initiative progress, and reporting out to all implementing partners and stakeholders.

The *PAD Program Manager* is responsible for engaging law enforcement partners, pilot area stakeholders, and service providers in the Pre-Arrest Diversion Service Network.

The *PAD Care Navigation Manager* is responsible for providing supervision and support to the Care Navigation staff, advocate for PAD participants, and develop social service partnerships.

The *PAD Care Navigators* are responsible for conducting intake assessments, provide intensive case management and care coordination for PAD participants.

The *PAD Office Manager* is responsible for internal agency operations and maintaining the PAD office for participants and guests.

PAD Liaison Officers are law enforcement officer designated to be points of contact to the arresting agency. The Liaison works closely with the Care Navigation team to educate officers in appropriate diversion referral protocol, promote and celebrate program successes, and identify challenges arising during the initial referral process. The Liaison also proactively monitors police radio communications to identify and encourage potential referrals. Upon completion of a successful referral, the LO will work with diverting officers to ensure timely submission of documents and HORIZON history reports on a point of time and weekly basis. As new law enforcement agencies are included in the referral process, additional liaisons may be identified.

PAD-Trained Officers are Atlanta Police Department officers in Zones 5 and 6 and other law enforcement personnel specially trained in PAD intake and referral procedures. PAD-trained personnel will be trained on the principles of harm reduction and trauma-informed care and how to apply these principles when dealing with addiction, mental illness, and homelessness, as well as PAD Operational Protocol.

PAD Partners are service providers willing to providing services to PAD participants using a model that is housing first, harm reduction, and trauma informed/culturally competent.

PROGRAM GOALS

Reduce Criminal Justice System Involvement for people whose behaviors are related to substance use/misuse, unmet mental health needs, and extreme poverty.

Reorient Attitudes and Responses to disorder, addiction, and mental illness, away from criminalization and toward public health.

Improve Participant & Community Quality of Life through evidence-based, trauma-informed, harm reduction interventions.

Strengthen Social Service Infrastructure for participants and all residents by providing training, connection and partnership to social service providers in Atlanta/Fulton County.

Advocate for Reallocation of Criminal Justice Funding to fund community-based safety and wellness strategies.

Shift Culture and Heal Relationships between communities and police by giving officers new tools and promoting law enforcement practices that demonstrate care, concern, and respect.

ELIGIBILITY CRITERIA

Individuals are eligible for the program where there is probable cause that they have committed an arrestable offense and the officer believes it is related to unmet mental health needs, substance addiction, and/or extreme poverty.

Priority Participants:

Individuals who have had multiple contacts with the criminal legal system and are at high risk for recidivism;

Individuals who are typically excluded or underserved by existing programs (including trans people, homeless people, immigrants, people with HIV);

Individuals who are disproportionately impacted by racial disparities in policing, arrests and sentencing.

EXCLUSION CRITERIA

Exclusionary criteria (not eligible for pre-arrest diversion if the following is true at time of incident):

The individual is under the age of 17 years old;

The individual presents a substantial risk of harm to self or others;

There is probable cause that the individual committed a violent crime or property crime against a complainant and the complainant objects to diversion;

The individual has the following pending charges:

Violent offenses: Murder, felony murder, voluntary manslaughter, kidnapping with bodily injury

Sex offenses: Rape, aggravated sodomy, aggravated child molestation, incest

Other offenses: Armed robbery, hijacking, home invasion

The individual has active exclusionary warrants (See Section VIII).

PROCEDURES

Initial Contact:

Upon contact with the individual, the responding officer shall determine, based upon the stated eligibility criteria, including his/her own assessment of the individual's suitability for the program, whether an individual will be offered the option of Pre-Arrest Diversion. At any time during the eligibility determination process and intake the responding officer may contact a supervisor to request assistance with the referral process.

If the individual is unable to provide informed consent and/or poses a risk to others, the individual shall not be diverted to PAD at that time.

If it is necessary to transport an individual to an emergency medical facility or emergency receiving facility (mental health) he/she may still be eligible for Pre-Arrest Diversion at such time that the individual is able to consent and prior to any possible arrest on the original charge. For any alleged crime involving a victim, the responding officer will advise the complainant of the Pre-Arrest Diversion program. If the complainant objects to diversion this will be noted in the PAD referral sheet for consideration by the Care Navigator. A complainant's objection will not be automatic cause for exclusion but may factor in to referral decision.

The individual can either accept or decline the offer to conduct an eligibility screening for the PAD program. The individual must be able to understand and consent to diversion for the identified offense. The responding officer shall read the PAD Referral Consent form in full to the individual before requesting signed consent to participate in the PAD eligibility screening.

At the start of the interaction the responding officer will ensure that his/her body camera is recording the interaction where applicable.

If the individual accepts, the responding officer shall call the Referral Hotline at 470-819-4855 to conduct a preliminary eligibility screening.

If the on-duty Care Navigation team approves the referral, the diverting officer will either transport the individual to a diversion facility or request a mobile unit at the scene.

If transporting to diversion center, the Officer will transport the individual and their belongings to a drop-off location as specified by PAD. The officer will remain at the drop-off location until the Care Navigation Team completes the referral intake form and secures the Officer's signature.

If mobile response is requested, the Care Navigation team will meet the responding officer and individual at the scene within 30 minutes. The responding officer will remain at the scene until the Care Navigation Team completes the referral intake form and secures the Officer's signature. Officers will follow current SOPs on seizure of contraband.

The Care Navigation Team will conduct a confidential referral intake with individual while the responding officer remains at the scene.

The Care Navigator will consult with responding officer on the incident and possible charges, and to determine any open warrants, pending charges, and the complainant's amenability to PAD (if applicable).

The Care Navigator will conduct a confidential interview with the individual to determine suitability for the program and confirm his/her willingness to participate. Once the assessment is complete, the Care Navigator may offer the individual provisional acceptance into the program (See Section IX).

The Care Navigator will not disclose information from the intake interview as evidence for arrest on this or other charges.

Prior to returning to service, the responding officer shall complete the following:
Complete and attach the PAD Referral Consent Form to the Field Interview Form.
Complete a Field Interview Form documenting the circumstances relating to the crime and noting that “suspect is a candidate for Pre-Arrest Diversion.” The suspected violation, Care Navigator’s name and Complainant’s name (if applicable) shall also be noted in the remarks.

WARRANTS

Open eligible warrants:

If an individual has an open warrant issued by the Atlanta Municipal Court or the Fulton County State or Superior Courts, the individual may be considered eligible for PAD on the current charge, subject to all other PAD eligibility/exclusionary criteria. If the individual has a warrant for any charges that would disqualify him/her from PAD, he/she will be considered ineligible for the program.

If the individual provides informed consent for PAD Eligibility Screening, the responding officer will transport the individual to the appropriate facility based on the warrant, but not arrest for the current charge.

The responding officer will contact the Care Navigator, who will if possible meet the responding officer and individual at the jail to complete the PAD Diversion Eligibility Assessment.

If the individual is accepted into the program, the Care Navigator will complete the PAD Referral Intake Form and submit to all prosecuting agencies prior to the individual’s first appearance on the warrant.

The Care Navigator will attend the first appearance with the individual to inform the judge about referral to PAD.

CASE MANAGEMENT INTAKE AND ASSESSMENT

Upon completion of the eligibility screening, the Care Navigator will immediately conduct an initial screening to gather basic information about the person, identify any acute immediate needs, and schedule an in-depth full intake assessment.

Based on the initial screening, the Care Navigator will first work to meet any immediate needs that must be addressed, such as shelter for the night.

He/she will also thoroughly explain the diversion process and the assistance that might be available through the PAD program for a willing participant.

The Care Navigator will transport the individual to a safe location.

The Program Manager shall submit the PAD Referral Intake Form to all prosecutors (County and City) within 24-hours of the initial intake. There is a presumptive acceptance of this decision by the prosecution with the right to veto following a PAD Eligibility Review meeting with the Care Navigator. If any prosecutor's office has concerns with the referral, the office will schedule a PAD Eligibility Review meeting with the Care Navigator. This meeting will take place within two (2) business days after receiving the PAD Referral Intake Form.

The Care Navigator will contact the participant to confirm follow-up appointment for full intake assessment, which should occur optimally within twenty-four (24) hours after the decision is made, or as soon as otherwise possible, but not longer than thirty (30) days from the referral date in the case of arrest referrals, unless the thirty (30) day limit is extended by the referring officer or his/her sergeant. If the participant is willing/able, the in-depth assessment can be completed in conjunction with the initial intake.

The first task of the Care Navigator is to determine the immediate cause of the individual's actions that led to the PAD referral.

In addition, the case worker will survey a wide range of factors that might contribute to ongoing encounters with law enforcement. Such factors include, but are not limited to:

- Chemical dependency (alcohol and other drugs);
- Mental health problems;
- Lack of housing;
- Prior legal involvement;
- Lack of previous employment; and/or
- Lack of education.

The Care Navigator will obtain written consent on the PAD Referral Sheet from the individual regarding their participation in the PAD program.

Appropriate Release of Information forms must be completed and signed by the participant that include PAD program and its participants.

Failure on the part of a participant to complete the in-depth assessment within thirty (30) days of intake is grounds for withdrawal of eligibility. Individuals who are engaged in the case management process but have not completed the assessment in thirty (30) days may remain in PAD at the discretion of the Operational Working Group.

INDIVIDUAL SERVICE PLAN

Once any acute needs have been addressed, the Care Navigator will work with each participant in one or more meetings to design an Individual Service Plan (ISP), which will form both an action plan and a key element of program evaluation.

As noted above, the plan may include assistance with housing, treatment, education, job training, job placement, licensing assistance, small business counseling, child care or other services.

COORDINATION OF SERVICES

The Care Navigator and participant will work together to address the needs identified in the ISP. Activities may include assistance with benefit applications, referrals for identified services/treatment, advocacy with providers, and accompaniment for appointments.

Since the objective is actually securing changes in individual behavior, there will be no prior limit on the time period in which an individual can receive services. The test, rather, is simply whether, in the judgment of Care Navigator, the participant is continuing to make good use of the resources PAD is dedicating to him/her.

CAPACITY

Adequate resources must be in place to appropriately serve all individuals who might be eligible and will dictate the number of participants that the Program can accept. In order to allocate resources in a transparent and fair manner, the days and times for PAD to take place will be determined according to treatment provider availability. On the appropriate day the service provider will notify the PAD, Inc. that they are accepting new PAD participants and how many slots are open. The service provider will make ongoing determinations of program capacity.

For purposes of program evaluation, names, date of birth, and incident number of all those arrested who are otherwise PAD eligible and who would have been diverted if not for resource limitations will be recorded by the responding officer or supervising sergeant in an ongoing log.

COMMUNICATION & DATA SHARING

Ongoing communication between case management/outreach staff and law enforcement is critical for program success.

On a monthly basis, PAD staff will conduct a Coordination Meeting with the Operational Working Group. PAD partners will use these meetings to:

- Share information about program participants' situation and progress;
- To discuss referral criteria, program capacity and compliance with the protocol; and
- To focus the attention of PAD program staff and APD in particular areas viewed with concern by community representatives.

Law enforcement supervisors will provide updates to PAD staff, as necessary, based on relevant encounters with participants and/or any other significant information.

Criminal justice system data is critical to evaluating the success of the PAD Pilot. Operational Work Group partners agree to share public information related to demographic information of individuals involved in law enforcement encounters; date, time and location of arrests; booking date, time and location; date, time and amount of bonds; and disposition of cases. This

information will be provided on a quarterly basis or within 15 days of a request made by PAD, Inc. staff or evaluation team.

PAD participants will be required to sign waivers authorizing program staff to discuss their cases and progress with the other partners at PAD staffing sessions. These consent authorizations are a condition of participating in PAD, and if not completed or if rescinded, the individual will be deemed not to be participating in PAD. The Atlanta/Fulton County Pre-Arrest Diversion Initiative, with support from operational partners, will have primary responsibility for PAD data management and information sharing. Participants' information will only be shared per the uses specified below. Protected data under HIPAA and CJIS will only be shared with participant's permission on an as-needed basis.

Authorized Uses of PAD Data

To provide or coordinate services to participants;

To identify and make referrals to programs that may assist participants;

To track program outcomes and produce program reports and evaluations;

For program administrative functions such as legal, audits, personnel, oversight, and management functions;

To comply with funding reporting requirements;

To identify service needs in our community;

To support system-level planning;

To conduct research for government and educational purposes approved by the Operational Coordinating Group;

Atlanta/Fulton County Pre-Arrest Diversion Initiative, Inc. will store information relevant to PAD operational partners on a shared platform, allowing access to necessary information remotely and between Coordinating Group meetings, including a list of PAD participants, their referral source, and status in PAD.

Data will be updated and validated regularly with assistance from other service provider and operational partners.

CASE CLOSURE/DISCHARGE

PAD participants may be involuntarily placed in an inactive status, as determined by consensus, by members of the OWG, for the following reasons:

Failure to complete the in-depth intake assessment within thirty (30) days of diversion or engagement;

Commitment of any offense that would deem the individual ineligible for PAD

Threatening the safety of PAD staff, Atlanta Police Department staff, or any community/project partner; or

Refusal to engage meaningfully in the case management process.

PAD participants may have their case voluntarily moved to an inactive status, and services discontinued, at any time, by notifying PAD staff.

All voluntary inactive statuses, in cases where established goals have not been met, shall be evaluated by the OWG for assessment, and when necessary, followed-up as determined.

Participants who have completed established goals and are no longer in need of PAD services will be considered “successful” and shall have their case moved to an inactive status, upon agreement of the OWG.

For evaluation and research purposes, the status of all PAD cases shall be listed as either active or inactive. A change in status shall be mutually agreed upon by members of the OWG.

APPENDIX

PAD-related Forms:

PAD Referral Consent Form: A form that describes individual's rights and asks for consent for officer to refer individual to PAD screening. To be kept with Field Interview Form.

APD Field Interview Form Example: Form to be completed by Atlanta Police Department upon successful diversion.

[Appendix G: Codebook](#)

Codebook

PAD_Stakeholders_Reconciled_3.6.19.mx18

3/19/19

Code System

1 BLUE	1
2 Midtown Residents _07.24.18_Confidential	0
2.1 Kate	52
2.2 Chris	33
2.3 Brian	43
2.4 Todd	47
2.5 David	17
2.6 Nicole	30
3 Sex workers	55
4 Sexual exploitation	9
5 Homeless/homelessness	45
6 Trans GNC Intersex LGBT	7
7 Challenges	55
8 Systemic issues	48
9 Level of crime	49
9.1 Re-entry; formerly incarcerated; incarceration	22
9.2 Recidivism/ rearrests/reengagement	21
9.3 Disproportionate or nonsensible charge	15
9.4 Drug/alcohol/Dope boys	53
9.5 Assault	9
10 APD	60
10.1 CIT	2
10.2 Midtown Blue	1
10.3 Midtown Neighborhood Association	4
10.4 Midtown Ponce Security Alliance/neighborhood watch	4
10.5 Enabling policing	13
10.6 GA State police	0
11 PAD	65
11.1 Resource Hub/Diversion Center	13
11.2 Harm Reduction	9
11.3 Moki	12
11.4 Relationships	47
11.5 Funding	26

11.6 Outreach	27
11.7 Results	46
11.8 Diversion & Referral process	41
11.9 Participant needs	41
11.10 PAD target participants	34
11.11 PAD participants	9
11.12 PAD support or lack of support	37
12 Health & Social Services	3
12.1 Social services	29
12.2 River Edge Community Service Board	0
12.3 ACT Team	3
12.4 ER	1
12.5 St Jude's	1
12.6 Grady	3
12.7 Mental health task force	2
13 Businesses	7
13.1 Boogalu	2
13.2 The Eagle	2
14 Quality of life	22
14.1 Mental health	48
14.2 Physical health	4
14.3 Home ownership status	4
15 Neighborhood characteristics	19
15.1 Next door	3
15.2 Atlanta history/politics	22
15.3 Beautification/gentrification	4
16 Location	3
16.1 Zone 5	1
16.2 Downtown	1
16.3 Midtown	7
16.4 Cross roads	0
16.5 Peachtree-Pine	2
16.6 Wheat Street	0
16.7 Hill Street	0
16.8 Edgewood	0

16.9 Piedmont Corridor	1
16.10 5 Points	1
16.11 Vine City	0
16.12 Garden District	3
17 Park	2
17.1 Hunt Park	0
17.2 Woodward Park	0
17.3 Piedmont Park	2
17.4 Renaissance park	0
18 Higher-level leadership	1
18.1 Xochitl	2
18.2 Ed Loring	0
18.3 Lance Bottoms	1
18.4 Jose Williams	0
18.5 Paul Howard	3
18.6 Xochitl_KJ	0
18.7 Chief Shields_KJ	1
18.8 Lance Bottoms_KJ	1
18.9 Paul Howard_KJ	2
19 Court	15
19.1 DA's office	7
19.2 District attorney	6
19.3 Prosecutors	7
19.4 Public solicitor	4
19.5 Judges	3
20 Churches	3
20.1 Our Lady of Lords	0
20.2 Antioch Baptist	0
20.3 First Presbyterian	0
20.4 Central Presbyterian	0
21 Community Based Organizations	1
21.1 Community Friendship	0
21.2 Midtown Assistance	0
21.3 The Living Room	1
21.4 AID Atlanta	0

21.5 Covenant House	0
21.6 United Way	5
21.7 Salvation Army	1
21.8 Hands on Atlanta	0
21.9 NAMI	1
21.10 Hope Atlanta	0
21.11 La Gender	0
21.12 Mercy Care	0
21.13 Someone Care	0
22 LEAD	5
23 Charzey	0
24 ARC	0
25 Monitor of Atlanta	0
26 910	0

1 BLUE

2 Midtown Residents _07.24.18_Confidential

2.1 Kate (Interviewer)

2.2 C

2.3 B

2.4 T

2.5 D

2.6 N

3 Sex workers

Mention of sex workers or sex work; or related - johns; pimps. Include any mention of sex work, customers, managers; include mention of working with or addressing issues of people engaged in sex work.

4 Sexual exploitation

Taking advantage of someone sexually; sex trafficking. Include any mentions of sexual abuse

5 Homeless/homelessness

People without a steady home, includes staying with friends or family. Use when homeless people or homelessness is general is mentioned; include mention of choosing homelessness. Include descriptions of unique challenges of being homeless.

6 Trans GNC Intersex LGBT

Trans, gender non-conforming, intersex, or LGBT people. Use for descriptions of trans GNC Intersex or LGBT community or concerns

7 Challenges

Include any mention of challenges to addressing participants' needs or to resident happiness and well-being that is not covered by more specific codes in the challenges section. Include any mention or description of things that prevent participants from engaging in programs or services. Include any mention of gaps in services. Challenges for PAD should be coded as PAD challenges. Use for references to feeling upset because one cannot change something

8 Systemic issues

Larger issues involving multiple interlocking systems or isms. Include any mention of issues that are systemic and that don't fit into another code. Include any mentions of anti-Black racism in the lives of participants. This includes mentions of effects that are caused by anti-Black racism. Include explicit descriptions of the criminal justice system. Include any mention of discrimination or 'isms' that don't fit into existing codes. Include any explicit descriptions of the legal system. Include any mention of legal issues (fines, outstanding warrants, workman's comp, etc.)

9 Level of crime

Low-level crimes/Misdemeanors /Non-violent/Felonies/Victim crimes. Exclude mention of quality of life issue. Include mention of any criminalized low-level crimes, quality of life offenses, non-violent offenders, and misdemeanors. Include marijuana. Include mention of violent or non-violent felonies. Include crimes that harm or injure someone as well as crimes that are described to be victim crimes but that don't target an individual. Double code with violent crime and police corruption/abuse/violence/harassment as appropriate. Include mentions of assault.

9.1 Re-entry; formerly incarcerated; incarceration

Prison re-entry; previously incarcerated. Use when describing processes or issues related to transition back home from prison. Also use this to discuss issues with coming back home from jail. Use for descriptions of formerly incarcerated people or concerns. Include any mentions of time spent in jail or prison or juvenile facilities; include any mention of jail; any mention of prison

9.2 Recidivism/ rearrests/reengagement

Re-arrest or multiple times in jail or prison. Re-arrest or multiple times in jail or prison. Mention of re-arrest. Include mention of re-engagement with officers that does not mention re-arrest or re-imprisonment.

9.3 Disproportionate or nonsensible charge

Punishment that far exceeds the severity of the offense; Non-sensible charges/arrest. Include any descriptions or mentions of disproportionate punishment

9.4 Drug/alcohol/Dope boys

Substances and substance use and drug dealers. Mention of problematic or social use of substances; any mention of drugs and alcohol; any mention of drug deals or dealing

9.5 Assault

Verbal or physical attack on someone. Include mentions of verbal or physical attack

10 APD

Atlanta Police Department. Include any mention of the Atlanta Police Department that is not covered by an existing APD code

10.1 CIT

Crisis Intervention Team- APD Officer Group that responds to mental health calls

10.2 Midtown Blue

Neighborhood private security, made up off part off-duty cops; under midtown alliance

10.3 Midtown Neighborhood Association

10.4 Midtown Ponce Security Alliance/neighborhood watch

10.5 Enabling policing

Actions that communities or individuals take to facilitate policing behavior. Include descriptions of calling the police and stings but also include descriptions of informal policing done by neighborhoods and individuals

10.6 GA State police

11 PAD

Pre-arrest diversion. Include any mention of PAD's past, Founders, Design Team, working group, policy advisory committee, PAD leadership and care navigators. Include people's descriptions of PAD that don't fit within other codes. Include any description of how big PAD is. Include any suggestions or questions about who PAD should be under. Include any mention of harm reduction as a standalone theme

11.1 Resource Hub/Diversion Center

Mention of something 'bigger,' systematic collaboration of effort, central location people can receive services, police drop-off center; mention of disconnect or poor collaboration across organizations/resources

11.2 Harm Reduction

Any specific mention or allusion to harm reduction; aligned
Include any expressions that treatment should be used for social problems rather than jail.

11.3 Moki

11.4 Relationships

Include any description of PAD involving necessary people. Include any description of organizations or people working together to carry out mission or goals. Include any mention of organizations that PAD works with to carry out its mission and goals. Include any description of people conveying information. Include any mention or description of how knowing people is what "gets things done"

11.5 Funding

Funding not being available sufficiently or when needed. Include any mention of programs or services not being sufficiently funded. Apply to PAD and other programs and services but not APD

11.6 Outreach

Acts of engagement and information sowing. Include any mention of outreach activities whether by

PAD or not and to diverse constituents

11.7 Results

PAD failure or success; long term vision for PAD; effects of PAD. Include PAD program outcomes that would constitute 'failure'; what would constitute program success; factors necessary for PAD to succeed; metrics/measurements of success or failure. Include any descriptions of what PAD should or should not look like in the future. Include positive, negative, neutral mentions of PAD effects

11.8 Diversion & Referral process

How diversions happen, diversion protocols; availability of PAD. Include any descriptions of how diversions happen & referrals, and who and when can access PAD. Include any mentions that PAD should be guided by the directives of participants and community members. Include any expression that PAD should exist separate from police. Include any mention of a need for social referrals from police or others

11.9 Participant needs

What participants must do or have. Include any mention of what participants must do or have. Basic needs, benefits, transportation. Include any mention of employment as a participant need; barrier to employment; attaining jobs. Include any mention of items or services that enhance one's quality of life that do not fit into the other code. Include mention of having or needing a place to stay at night; a place of ones own; shelter; transitional. Include mention of day shelter. Include any mention of social support or lack of social support.

11.10 PAD target participants

Descriptions of who PAD should or shouldn't serve. Use whenever someone expresses who PAD should or should not target in terms of people (e.g., sex workers), offenses (e.g., panhandling), or topics (e.g., mental illness)

11.11 PAD participants

Mention of PAD participants. Use for descriptions of current, enrolled PAD participants

11.12 PAD support or lack of support

Support or lack of support for PAD; viewpoints related to harm reduction alignment and lack of alignment; reactions to PAD. Include any statements of support for lack of support for PAD that do not fit into existing codes. Include any mention from an interviewee where they express support or

lack of support for harm reduction in relation to PAD participants. Include any mentions of PAD buy in or lack of buy in. Buy-in includes willingness to support financially, with donated work, with emotional labor or with time

12 Health & Social Services

Any mention of an organization that provides mental health treatment

12.1 Social services

System of offering some behavioral, mental, social, emotional, educational, and physical health care needs. Include whenever social service systems are described. Exclude mentions of specific social service organizations (use organization codes)

12.2 River Edge Community Service Board

Out of Macon, provides our behavioral health for Fulton County

12.3 ACT Team

Assertive Community Treatment Team - Comprehensive health services for those in crisis

12.4 ER

12.5 St Jude's

12.6 Grady

12.7 Mental health task force

13 Businesses

Any mention of a business not covered by another code; mention of the way businesses influence community & police behaviors & perceptions

13.1 Boogalu

Specific business

13.2 The Eagle

Specific business

14 Quality of life

The degree to which someone lives a life in which needs, wants, and desires are met. Include any description of neighborhood quality of life or quality of life issues. Use whenever there is discussion of kids in Midtown.

14.1 Mental health

Psychological well-being and treatment; trauma - Stressors that individually and/or cumulatively overwhelm one's capacity to cope. Include any descriptions of mental health as an issue as well as positive and negative mental health

14.2 Physical health

Physical wellbeing. Include any description of physical well-being

14.3 Home ownership status

Whether or not one owns or rents a home

15 Neighborhood characteristics

Qualities or history of the neighborhood. Neighborhood demographics, activities, benefits, history, issues, activities or things to do in the neighborhood. Dog walking/parks.

15.1 Next door

15.2 Atlanta history/politics

How the city of Atlanta runs. Include any descriptions of how the city of Atlanta runs in terms of politics or history

15.3 Beautification/gentrification

Removal of homeless people, low-income people of color, and 'quality of life' crimes. Include any mention of actions that are intended to remove homeless people, low-income people of color and visible 'quality of life' crimes

16 Location

A place -in this case a desired place

16.1 Zone 5

16.2 Downtown

16.3 Midtown

Specific neighborhood

16.4 Cross roads

16.5 Peachtree-Pine

16.6 Wheat Street

16.7 Hill Street

16.8 Edgewood

Specific neighborhood

16.9 Piedmont Corridor

Specific neighborhood

16.10 5 Points

Specific neighborhood

16.11 Vine City

Specific neighborhood

16.12 Garden District

Specific neighborhood

17 Park

A place of greenery

17.1 Hunt Park**17.2 Woodward Park**

Specific location

17.3 Piedmont Park

Specific location

17.4 Renaissance park

Specific location

18 Higher-level leadership**18.1 Xochitl**

Racial Justice Action Center Director (Pronounced “so-chal”)

18.2 Ed Loring

18.3 Lance Bottoms

18.4 Jose Williams

18.5 Paul Howard

18.6 Xochitl_KJ

18.7 Chief Shields_KJ

18.8 Lance Bottoms_KJ

18.9 Paul Howard_KJ

19 Court

19.1 DA's office

19.2 District attorney

19.3 Prosecutors

19.4 Public solicitor

19.5 Judges

20 Churches

20.1 Our Lady of Lords

20.2 Antioch Baptist

20.3 First Presbyterian

20.4 Central Presbyterian

21 Community Based Organizations

21.1 Community Friendship

21.2 Midtown Assistance

21.3 The Living Room

21.4 AID Atlanta

21.5 Covenant House

21.6 United Way

21.7 Salvation Army

21.8 Hands on Atlanta

21.9 NAMI

21.10 Hope Atlanta

21.11 La Gender

21.12 Mercy Care

21.13 Someone Care

22 LEAD

Law Enforcement Assisted Diversion