

**Roadmap:
Optimizing Decarceration,
Diversion & Restorative Justice
for Orleans Parish**

Table of Contents

Preamble	4
Public Health Prevention Framework	5
Figure 1. Stages of Prevention	6
Roadmap Contributors	6
Roadmap Endorsements: Individuals and organizations have endorsed the Roadmap report:	6
Rationale for the Roadmap	6
Guiding Principles and Roadmap Recommendations	10
Figure 2. Justice System Off Ramps – Key Decision Making Points	11
Pre-Arrest	12
Pre-Trial	12
Post-Conviction/Adjudication	14
Community-Based Social Support System and Diversion Programs	14
Figure 3. Community-Based Social Support System	17
.....	17
Funding	18
Challenge to Policy Makers	18
Major Types of Programs Needed	19
Restorative Justice Diversion: Accountability That Heals	19
RJD Guiding Principles	19
RJD Case & Program Eligibility Recommendations	20
Stages of the Process from Model RJD Programs:	20
RJD MOU Recommendations	21
Behavioral Health Services and Diversion Programs	22
Youth Diversion Programs: Special Considerations	25
Key Takeaways from the Academic Research on Youth Diversion	25
Youth Diversion Program Recommendations & Considerations	26
Figure 4. Juvenile Justice System Off Ramps – Key Decision Making Points	27
Figure 5. Youth Diversion Program Process and Key Considerations	30
Youth Diversion Program Barriers	31
Spotlight: Arts-Based Youth Diversion Programs	31
Arts-Based Diversion Program Models	32
Arts-Based Youth Diversion Program Structure	33
Juvenile Diversion Case Study: Jefferson Parish	34
References	35

Appendix A: Number of People Potentially Eligible for Diversion in Orleans Parish..... 37
Appendix B: Cost-Benefit of Diversion Per Case 42
Appendix C: Community-Based Restorative Justice & Diversion-Related Services Currently Available for Orleans Parish..... 53
Appendix D: Model MOU for RJ program 53

Preamble

In recent years, and particularly in the last few city-wide election cycles, there has been increasing talk of shifting our approach on crime from mass incarceration to addressing the underlying, root causes of crime. Despite some changes in city ordinances and some programmatic efforts to accomplish this, this laudable impulse has not been accompanied by a systematic or comprehensive approach to actually making this happen.

This Roadmap describes a stepwise approach to moving from mass incarceration as a response to violence and other forms of criminal conduct and misbehavior to a comprehensive, systematic approach to addressing these issues in a less punitive, more constructive and restorative manner that addresses root causes while avoiding the adverse consequences of incarceration.

The Roadmap is intended as a complement to the policy recommendations of the People's DA Coalition Platform and the Platform for Youth Justice. The Roadmap describes the importance of and a proposed structure for diversion and alternatives to incarceration, while simultaneously encouraging that whenever possible, the district attorney (DA) should drop or refuse charges rather than prosecuting and recommending diversion or alternatives to incarceration.

The Roadmap describes a stepwise strategy to build a comprehensive, coordinated system of social supports. The goal of this system is to:

- Reduce prosecution and incarceration;
- Build a coordinated, comprehensive system of clinical, social supports and wrap-around services and programs that are focused on harm reduction, restoration, and secondary prevention of crime and recidivism;
- Reverse decades of over-criminalizing various behaviors and health problems; and
- Recoup savings from the CLS to fund this system.

Public Health Prevention Framework

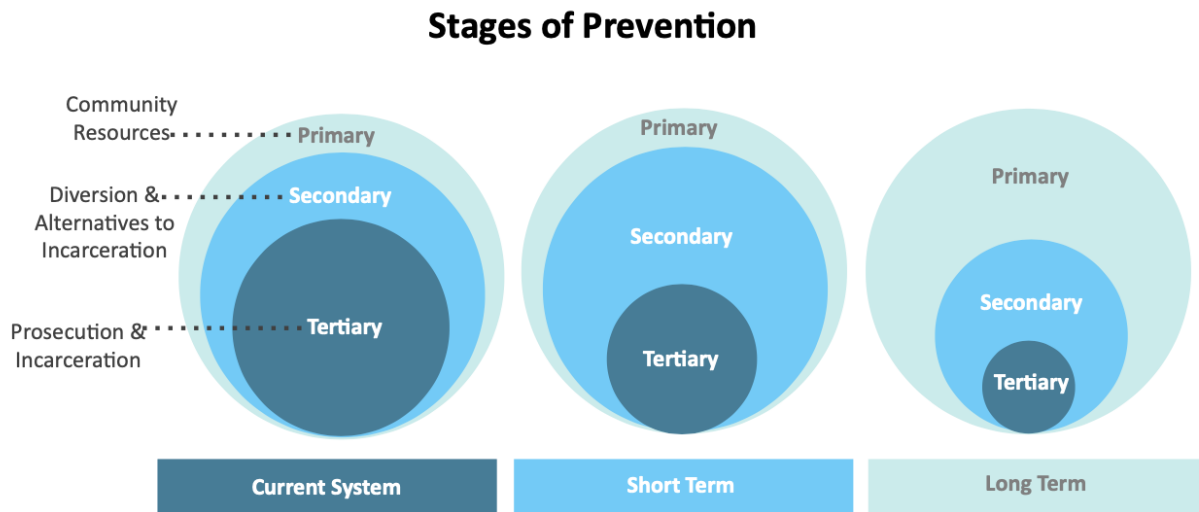
The Roadmap is based on the public health concepts of primary, secondary and tertiary prevention.

	Primary Prevention	Secondary Prevention	Tertiary Prevention
Target Population	Focused on general population and addresses root causes in order to prevent undesired outcomes	Focused on high-risk population/individuals as they have initial encounters with the CLS	Focused on those who have committed crimes for which public safety requires incarceration and on re-entering citizens
Prevention Strategy	Broad-based community resources and services that enable residents to live well and have needs met	Addresses root and proximate causes of crime and CLS involvement to reduce harm, direct away from the CLS, and reduce future crime Provides focused community-based support, social and health services through formal diversion, alternatives to incarceration and/or voluntary referral to services that help individuals build more stable, resilient, and healthy lives.	Intends to reduce future crime by providing rehabilitative services, education, job and life skills training through prison, jail, and re-entry programs to assist individuals in successful re-integration in the community

As Figure 1 illustrates, our current system is characterized by **an over-reliance on tertiary prevention** via prosecution and incarceration. The Roadmap focuses on **secondary prevention as a first step** toward building out the social support and services infrastructure needed to reduce incarceration and shift management of social issues back into the community and out of the CLS after decades of overcriminalization. This step can reasonably be funded through initial community and governmental investments, followed by **recouping the savings from reduced incarceration** in order to further build out the needed community capacity to optimize decriminalization, diversion and restorative justice. Once established, this **infrastructure of social supports and services** can be further expanded and focus shifted to **primary prevention** in the broader community.

When thought of as a series of concentric circles, the Roadmap approach will reduce the inner circle of incarceration (tertiary prevention) while expanding the middle circle of social supports and services for people as they come into contact with the CLS (secondary prevention), followed later by expansion of the circle of primary prevention of crime and CLS-involvement. In no way does the Roadmap intend an interim reduction in primary prevention in order to access social support and services.

Figure 1. Stages of Prevention



Although the Roadmap diversion approach is guided by a public health framework, we also recognize that many people who have police encounters do not need services in order to avoid future criminal legal system (CLS) involvement, and that unnecessary service provision can be costly and ineffective. We embrace diversion and alternatives to incarceration without services when they are not needed to prevent future CLS involvement.

Roadmap Contributors

The Roadmap is the product of many months of work by an ad hoc group of individuals representing two dozen organizations working in and alongside the criminal legal system (CLS) in Orleans Parish, convened jointly by the St. Charles Center for Faith + Action and Ubuntu Village.

[Roadmap Endorsements:](#) Individuals and organizations have endorsed the Roadmap report:

Rationale for the Roadmap

Over the last 50 years, incarceration rates increased in the US by a factor of seven¹ due to criminalization of previously non-criminal behaviors, increasing rates of prosecution and harsher, longer sentences.² The US now leads the world in proportion of its citizens incarcerated and Louisiana has the highest incarceration rates in the country,³ with New Orleans residents among the most incarcerated anywhere. During this time, crime rates bore little relationship to incarceration rates. Clearly, increased prosecution and incarceration have not made our community safer.⁴ Much of the burden of increased incarceration has fallen on Black and Brown people in America⁵ and on those living in or near poverty.⁶ Many have been trapped in the long-term punitive effects of incarceration with reduced access to education, jobs, housing and social welfare programs, which has had intergenerational effects and contributed to the income and wealth disparities for people of color in the US.⁷

The current retributive CLS neither prevents future crime nor results in crime survivor satisfaction. According to the Bureau of Justice Statistics:⁸

- About two-thirds (67.8%) of released prisoners were arrested for a new crime within 3 years, and three-quarters (76.6%) were arrested within 5 years.
- Within 5 years of release, 82.1% of property offenders were arrested for a new crime, compared to 76.9% of drug offenders, 73.6% of public order offenders, and 71.3% of violent offenders.
- More than a third (36.8%) of all prisoners who were arrested within 5 years of release were arrested within the first 6 months after release, with more than half (56.7%) arrested by the end of the first year.

Since Hurricane Katrina, when Orleans Parish had the highest incarceration rate in the world, the daily census at the Orleans Parish Prison/Orleans Justice Center has declined dramatically, but New Orleans residents continue to be among the most incarcerated in the world with lingering, intergenerational effects. In 2017, the Louisiana Legislature passed components of the Justice Reinvestment Act but, after a brief stint at number two, Louisiana again has the highest incarceration rate in the world, and in particular, very high rates of incarceration for nonviolent and minor crimes. Much remains to be done to rebalance and reimagine our CLS to make it more just, more fair, and to offer a true opportunity for those who have made mistakes to have a second chance at being the best they can be for themselves, their families, and their community.

In recent years, the City of New Orleans, in collaboration with the MacArthur Safety and Justice Initiative, has taken a number of steps to reduce the population of the Orleans Justice Center. The New Orleans City Council has taken steps to reduce penalties and incarceration for municipal misdemeanors and has funded several initiatives to facilitate case management and referral for services, especially mental health and substance abuse services in lieu of incarceration or prosecution. These initiatives include Pre-Trial Services and the Law Enforcement Assisted Diversion (LEAD) pilot program in the NOPD 8th District. In order to reduce the harm done by incarceration and prosecution that do not contribute to community safety, a more comprehensive and systematic approach is needed to secure the social supports and services needed by those who come into contact with the CLS, reduce system costs and create better individual, family and community outcomes. Pre-trial diversion and restorative justice programs that are coordinated and link to existing community-based services and programs and build on publicly funded services (e.g. Medicaid) are an important part of that solution.

Pre-Trial Diversion offers many benefits to individuals, families, and communities. Diversion programs reduce the stigma associated with court appearances, prevent the costly interruptions to daily routines associated with even brief incarceration (e.g. job loss, childcare issues, eviction), reduce recidivism and court costs, and improve justice system efficiency.⁹ Louisiana continues to lead the nation in incarceration and New Orleans contributes significantly to those numbers, with an incarceration rate nearly double the national average.¹⁰ Each incarcerated person represents a community member torn away from their loved ones as well as a significant financial burden on taxpayers. According to the Vera Institute, the average cost per incarcerated individual is \$47,057 per year.¹¹ Equally concerning, arrests and convictions in New Orleans have a clear racial bias. Black men are 50% more likely to be arrested than white men and Black women are 55% more likely to be arrested than white women.¹² This disparity is even greater within the juvenile population, where 95% of young people under the Office of Juvenile Justice's supervision from Orleans Parish are Black.¹³ Pre-trial diversion offers Orleans Parish the opportunity to develop alternatives to trials and incarceration that will heal our communities and

families, minimize racial injustices, and save taxpayers millions of dollars. Early pretrial diversion, occurring as soon as possible after initial CLS encounter with police is important because evidence shows that individuals who spend more than 72 hours in jail are at far greater risk of losing their jobs, homes, vehicles and families than those who are released sooner.¹⁴

Pre-trial diversion has a proven track record of success. In a large study of federal cases, researchers found that in 88% of cases, the individual successfully completed diversion and the case was not prosecuted.¹⁵ Not only did these individuals avoid the stigma and costs associated with being tried in court, but they were also able to continue their lives at home, avoiding disruptions in their work life and their families' schedules. Incarceration carries with it many other penalties that harm families for years: the loss of public benefits and public housing, employment setbacks, pauses in child support payments, and negative health outcomes.¹⁶ This latter concern has become especially clear in the era of COVID-19, where even a short stint in a jail cell could mean illness, transmission to family members, or death.^{17,18} Unnecessary arrests, trials, and incarceration present dangerous health risks to the individuals arrested and their families, as well as those tasked with monitoring them: police, prison guards, and court staff. A robust pre-trial diversion program would reduce the number of people passing through these systems, alleviating the burden on both communities and correctional facilities.

The benefits are especially clear for young people. The goal of the juvenile justice system is to rehabilitate. Trials and incarceration should be used only as a last resort. Pre-trial diversion gives caretakers and juveniles the opportunity to collaborate, develop a plan tailored to that individual, and heal and grow together. This allows families to build positive parent/child relationships by directly engaging parents in supporting their child.¹⁹ Moreover, these programs employ best practices by acknowledging the limited impulse control of the adolescent brain (especially for adolescents with trauma)²⁰ and providing resources to help young people grow, enhance self-esteem, and make healthy decisions. Researchers in California found that pre-trial diversion programs “bridge the gap between parental sanctions which may be too lenient, and juvenile sanctions which may be too harsh.”²¹ Parents often come to the juvenile courthouse wanting help with a child they see as unruly, but too often the only option presented to them is incarceration. Pre-trial diversion offers a more holistic and trauma-informed way forward for juveniles accused of crimes and their families.

Additional positive outcomes for pre-trial diversion have been found for individuals with mental illness. Though more research is needed, potential benefits include: greater treatment effectiveness, community integration, and reduced homelessness.²² It is of the utmost importance that New Orleans develops successful and evidence-based programs to treat individuals with mental illnesses that do not rely on incarceration and/or the CLS. Pre-trial diversion can be part of solving that puzzle.

Nationally, most diversion programs and alternatives to incarceration are siloed within specific service areas, such as mental health or substance use diversion or specialty courts. In local jails 64% of people have a mental health problem, 17% a serious mental health problem and 68% substance use disorder (SUD) and many of these individuals have other social problems as well, including homelessness and/or a history of trauma. Diversion reduces time spent in jail in the year after the offense from an average of 173 to 40 days for adults and reduces youth recidivism by 25%.²³ For people in jail with mental illness, CLS costs are reduced by early diversion by both a reduction in jail time (from an average of 27.3 to 4.1 days pre-trial) and from reduced health care costs to the jail. Savings of \$47,000 were noted for each person with non-violent felony charges diverted to treatment and recidivism also decreased.²³

Diversion programs for people with mental health or substance use issues should incorporate best practices and evidence-based approaches that take into consideration the natural history of the health problem and expected patterns of recovery. For individuals with serious mental illness, management of their condition is expected to be life-long and punctuated by periods of good control interrupted by exacerbations. People with other forms of mental health issues may resolve them over time with appropriate support and treatment, while others will need episodic or life-long management. For those with SUD, expected patterns of recovery include lapses and relapses prior to achieving long-lasting recovery and sobriety which may require on-going support, e.g. 12-Step programs to sustain.^{24,25} Diversion programs should therefore be led by trained professionals and governed by these expectations. Success of the diversion program should be judged by professional criteria that recognize these patterns and reward progress while not placing inappropriate expectations for immediate and enduring sobriety on participants over the period of CLS surveillance.^{25,26}

While there is clear and compelling evidence that a large proportion of the people held in local jails have mental health and substance abuse disorders and that diversion programs are effective in reducing CLS costs and recidivism,^{23,27} there are few, if any programs nationally, that take a more comprehensive approach to identifying and meeting other social support needs of these and other CLS-involved individuals.²³ This comprehensive approach is more often applied to youth diversion than adult diversion. But even in youth diversion programs, youth of color and youth in some geographic areas face gaps in services that contribute to disparities in diversion programs and other alternatives to incarceration. For example, the 2019 [Report of the Massachusetts Juvenile Justice Policy and Data \(JJAPD\) Board *Improving Access to Diversion and Community-Based Interventions for Justice-Involved Youth*](#) noted gaps in services and found that the structure of diversion programs contributes to “systemic inequalities.” They recommended enhancing communication and coordination about diversion services by increasing the availability of diversion coordinators who are responsible for:

- “Accepting referrals from all diversion decision-makers (police, court clerks, district attorneys, judges)
- Administering an evidence-based risk and needs assessment
- Developing a diversion agreement based on the results of that assessment as well as conversation with the youth, their family, and the youth’s attorney
- As appropriate, connecting youth and their families with community-based services and advocacy support
- Monitoring diversion cases to ensure diversion conditions are completed
- Reporting on gaps in services or unmet service needs in the communities in which they work
- Communicating with community-based service providers as appropriate
- Tracking and reporting aggregate data on diversion”

The JJPAD Board recommended team-based coordination for youth with higher needs. Nationwide, pre-arrest diversion programs are increasingly addressing social support needs, including housing, referrals to clinical care, and more. Exemplary programs taking this approach include the [Policing Alternatives and Diversion Initiative in Atlanta](#), [CAHOOTS, Crisis Intervention Helping Out on the Streets in Eugene, OR](#), and the [Albuquerque Community Safety Department in Albuquerque, NM](#)).

New Orleans has the opportunity to be at the forefront of innovative developments in policing and prosecution. Typically, pre-trial diversion is offered to individuals society finds less threatening: white people, women, highly-educated individuals, U.S. citizens, and individuals who are employed.²⁸ However, New Orleans can use an intentional program of pre-trial diversion for the group that is

disproportionately harmed by the current systems of arrest and incarceration: Black people. By developing a robust, coordinated program of pre-trial diversion and wrap-around services, New Orleans can reduce the glaring biases in its CLS, while also providing some relief and assistance to communities and individuals already devastated by high incarceration rates, skyrocketing unemployment, poverty, and negative health outcomes. Keeping families together, while providing programming that assists individuals in accessing services, is the right thing to do—and will likely save the city millions.

Guiding Principles and Roadmap Recommendations

The Roadmap follows the guiding principles set forth by Fair and Just Prosecution in [Considerations in Crafting Diversion Models](#):

“Diversionary programs should be tailored to the needs, resources, and unique circumstances of each jurisdiction. However, several guiding principles are worth bearing in mind:

1. Whenever possible, promote models that **avoid and/or limit contacts with the criminal justice system**. Criminal justice contacts — however brief — can have negative psychosocial and employment effects, and often fail to address the underlying cause of criminal behavior.
2. **Rely on clinical staff** — not prosecutors or other legal personnel — to design and run evidence-based and individually-tailored treatment programs.
3. **Rigorously track outcomes** and recidivism rates in partnership with outside evaluators.
4. **Avoid, whenever possible, imposing costs** of program participation on the individuals. Such charges, if absolutely necessary, should be based on an individual’s ability to pay and there should be clearly defined indigency exceptions.
5. **Limit exclusionary criteria** to the greatest extent possible. Individuals with moderate to high needs tend to pose the greatest burdens on correctional systems, and if diverted with appropriate programming, can offer the greatest reductions in recidivism and costs.
6. Carefully consider which program conditions — such as full sobriety — are truly necessary. **Program requirements should seek to address the underlying causes of the misbehavior** and promote safer and healthier communities. Similarly, prosecutors should not presume that punitive responses to noncompliance with program conditions are always appropriate or necessary.
7. While elected prosecutors can and should be leaders in promoting these programs, they should **not necessarily presume that a justice system response is the most effective tool** to address problematic substance use, mental illness, homelessness, poverty or similar issues. Instead, elected prosecutors can be powerful conveners of other system leaders and community groups to create partnerships and responses that will best serve the community and the individual.”

We identify interventions and diversion opportunities at each stage of the CLS. Our most important recommendation is that release should occur as early as possible after initial law enforcement encounter, when consistent with public safety. Figure 2 shows an overview of the “off ramps” from the CLS and the key points at which diversion may occur. In order to realize the full benefits of diversion, the Roadmap recommends that diversion should primarily occur pre-arrest or prior to charges being brought by the DA, rather than the system of post-plea diversion in use in recent years. Specific recommendations are made below related to each stage of the CLS process from arrest to adjudication.

Figure 2. Justice System Off Ramps – Key Decision Making Points

Justice System Off Ramps: Key Decision Making Points

Referral to diversion can occur at any time up until trial, but it should occur as early in the process as possible. This graphic illustrates the options for diversion referral decision points.

CLS Off-Ramps	Decision Points	Key Considerations
<p>Community-Based Organizations Crisis Care</p>	<p>Prevention</p> <p>Well-funded support services and programs are in place to prevent initial contact with the CLS.</p>	<ul style="list-style-type: none"> The same community-based organizations may be used in prevention, diversion programs, alternatives to incarceration and voluntary services.
<p>Contact with Law Enforcement</p> <p>Warn & Release Arrest Refer to Pre-Arrest Diversion</p>	<p>Pre-Arrest Referral</p> <p>Police refer cases to diversion as an alternative to arrest, according to specified criteria and make voluntary community referrals.</p>	<ul style="list-style-type: none"> Police should opt to warn and release in instances when intervention is unnecessary. Police referrals should primarily be used in instances when social services or mental health treatments are needed.
<p>Booking</p> <p>Detain Release</p>	<p>Booking</p> <p>At booking, the court determines whether or not the individual will be detained or released while their case proceeds. Community-based social support system interviews and advocates for pre-trial release with/without diversion.</p>	<ul style="list-style-type: none"> Anyone who meets criteria for diversion or early-release should not be detained. Community-based social support staff should be placed in intake to conduct diversion screening at arrest.
<p>Pre-Arrest</p> <p>Dismiss Arraignment Refer to Diversion</p>	<p>Pre-Arrest Referral</p> <p>Cases are referred to diversion as an alternative to prosecution, according to specified criteria.</p>	<ul style="list-style-type: none"> Pre-trial referral should happen prior to the filing of a charge. Cases that would not otherwise be prosecuted should NOT be referred to diversion.
<p>Post-Arrest</p> <p>Trial or Sentencing Refer to Diversion</p>	<p>Post-Arrest Referral</p> <p>The DA retains the option to end the prosecution and refer cases to diversion at any time before a sentence is finalized.</p>	<ul style="list-style-type: none"> Post-arrest diversion referral is a last resort. Diversion should occur earlier in the process to avoid the negative consequences of formal court processing. Post-arrest referral should never require a guilty plea.

Pre-Arrest

Alternatives to Arrest:

- Whenever possible, people who come into contact with law enforcement should be issued warnings, cautions or tickets and released.
- People should not be arrested and jailed for lack of payment of fees and fines that they cannot afford.
- Law enforcement assisted referral for individuals who might otherwise face arrest is strongly encouraged for low level offenses.
- Specially trained teams should be available to respond to calls involving individuals with mental illness with police back-up.

Alternatives to Incarceration:

- Alternatively, whenever possible, people who come into contact with law enforcement should be issued summons in lieu of arrest and booking.

Pre-Arrest Diversion:

- Pre-arrest diversion with summons is preferable to arrest and booking unless public safety would be endangered.

Pre-Trial

Alternatives to Incarceration:

- When people are arrested and booked, they should be released on ROR, personal security bonds or minimal, affordable bonds in lieu of being held in jail pre-trial unless doing so would endanger public safety
- When an accused person is ordered released from jail by ROR, personal security bond or payment of bond, the Orleans Justice Center should release them within six hours
- Supervision in lieu of detention
- Services, if any, ordered by the Court as a condition of release should be coordinated through the Community-Based Social Support system and be consistent with these guiding principles

Alternatives to Prosecution:

- When people are arrested, whether released from jail or not, the DA should refuse charges whenever possible, consistent with public safety, and as soon after arrest as possible.

Community-Based Social Support Assessment & Advocacy:

- All individuals arrested and booked should be provided, at booking, with information about and access to community-based social support and clinical services they may wish to access voluntarily, including
 - Case management,
 - Transportation,
 - Housing alternatives,
 - Employment services,
 - Assistance with food stamps, Medicaid, as well as
 - Referral and access to mental health and substance abuse services appropriate to their needs and which they voluntarily choose to participate in.

- Care should be taken not to “widen the net” for services, but to assure that those who need social supports and/or services are able to obtain them.
- A coordinated community-based social support system should be publicly funded to provide for the assessment and advocacy services outlined prior to release, charging decision or diversion decision. This system should also be publicly funded to provide wrap-around coordinating, navigation and case management services not available within diversion programs and should provide and coordinate referral to services, when needed or ordered as part of diversion or as a condition for release.
- Coordinated community-based social support and advocacy services should be governed by an MOU and responsible for initial contact with an accused individual, providing information regarding services and options available and for advocating for needed services and diversion when warranted, as well as coordination of and referral to appropriate services. Funding should not be contingent on whether or not referrals are completed.

Pre-Trial Diversion:

- We recognize and understand that regardless of who operates diversion programs and where they are housed, the DA is the gatekeeper, the point of decision-making. The Orleans Parish District Attorney (DA) is and should be expected to support diversion and be held accountable for doing so.
- For individuals against whom the DA decides to bring charges:
 - Diversion appropriate to the charges and their needs for social supports, as determined by a community-based program positioned as an advocate for the accused should be made available as soon as possible after arrest
 - Diversion options should include restorative justice diversion for any accused individuals who voluntarily choose to participate, provided that the person(s) harmed also choose to voluntarily participate
 - Diversion should be offered to anyone for whom it is requested by the person(s) harmed
 - Diversion programs should be as brief as is possible and the period of CLS supervision in diversion should, in no case, extend longer than the expected duration of incarceration for the charge
 - In general, adult diversion should not last longer than 6 months; youth diversion should not last longer than 3 months
 - The opportunity to participate in a diversion program should not be contingent on the ability to pay for services and ideally, should be provided free as a less expensive option than jail for taxpayers with better track record of reducing recidivism
 - When fees are assessed, they should be waived whenever needed to allow for optimized participation and should never be the basis of a finding of “failure to complete” diversion and/or return to prosecution.
 - Diversion should be offered to all those who meet the eligibility criteria for diversion and should not be reserved for only those most likely to succeed in diversion
 - Once a person successfully completes a diversion program, charges against them should be dropped
 - In the rare case when diversion occurs after charges are brought by the DA, the charges and arrest should be expunged after successful completion of diversion. This process should be facilitated by the DA, court and the community-based case manager for the individual and costs waived whenever possible, particularly if the individual is unable to pay them

- If a person who has successfully completed their diversion program opts to voluntarily continue in the program, that should be encouraged and supported by public funds if the individual is unable to pay and their CLS-system supervision should be terminated
- Diversion programs should be community based and not operated by the DA office or courts
- Diversion programs should be governed by MOUs with the DA's office, the Public Defender's (PD) office and, when funded with public funds, also with the City. When also used to provide Court ordered services in lieu of drug court, mental health court, etc, the court should also be a party to the MOU.
- Diversion program MOUs should:
 - clearly state the required qualifications of the diversion program provider and staff, the duration of diversion, the services to be provided, criteria for successful completion, and the criteria for program failure and referral back to the DA/court
 - provide for reimbursement for services in excess of those eligible under Medicaid, Medicare or other private insurance and not within the means of the person in diversion
 - specify the support services, including case management, accessible through the coordinating community-based support agency
 - specify the sanctions that are available to the diversion program provider short of referral back to the DA/court
 - specify the criteria for evaluating the program's success and criteria for MOU continuation or cessation
- Transparent, timely and quality data and policies are critical to ensuring that diversion programs are able to operate optimally, that accused individuals are given a fair chance to participate, that best practices are used, and that diversion programs are accountable for the resources they receive.

Post-Conviction/Adjudication

- Should a case go to Court and the Court finds that diversion to a Court-supervised alternative to incarceration program, e.g. drug court or mental health court or deferred disposition agreement (juvenile) is warranted, the judge is strongly encouraged to refer the individual to the community-based diversion system and defer to the professionals providing services to determine, if and when referral back to Court is warranted and if drug testing or other types of monitoring are appropriate

Community-Based Social Support System and Diversion Programs

A transition is recommended from the current CLS-sponsored diversion services to a diversion system that occurs primarily pre-arrest or prior to charges being brought by the DA as well as, voluntary, non-CLS supervised services through a coordinated, community-based system of social support and clinical service providers.

Where possible, services program costs should be covered by other existing public programs, (e.g. Medicaid, Medicare and private insurance reimbursement for reimbursable services) and given that 85% of individuals arrested in Orleans Parish qualify for Public Defender services, it is anticipated that 85% will qualify for Medicaid which can be used to cover the costs of the clinical services described below. However, the **city should provide the funding needed for wrap-around and other services** that are not reimbursable from these sources. **Funding to stand-up and sustain needed capacity should be**

provided by the City to support the services described below. Such funding may be supplemented with funding from other sources, particularly grants in the early phases of development but the goal over time should be for these services to be provided by the government as an alternative system to prosecution and incarceration. **Funds saved in the CLS should be recouped and used to fund these services.** It is anticipated that these services and their funding will be ramped up over a period of a few years as capacity is increased and as more and more individuals are shifted from CLS-involvement to non-punitive community-based services outside the CLS. As this occurs more and more, funding should be available to be shifted from the CLS to the community-based services.

Eligibility for diversion programs should be a key element of the MOUs governing the diversion process and programs, vary with the individual service provider, and incorporate the DA's office assessment. While diversion has most often been offered nationally to individuals charged with low-level and first-time offenses, there is a movement nationwide to expand these programs to take on some individuals charged with more serious offenses and individuals with a history of multiple prior arrests or convictions. There are also some programs nationally, notably [Common Justice](#) in NYC that work exclusively with individuals charged with more serious crimes and with prior convictions. We anticipate that most of the New Orleans programs in the near future will focus primarily on the individuals charged with minor to medium level offenses and without a history of serious violent crime. They should be expanded overtime to include more serious charges as increased funding and capacity become available. Restorative Justice and programs for the seriously mentally ill may be exceptions and engage those charged with more serious crimes sooner.

An over-arching set of assessment, advocacy, triage, navigation and referral services should be offered through a community based organization which

- **Engages system-involved individuals prior to arrest or at booking,**
- **Makes appropriate referrals to agencies able to provide specifically needed, evidence-based services using best practices**
- **Avoids net-widening and**
- **Provides the social supports needed to enable the individual to minimize current and future CLS exposure and involvement.**

This agency

- **Interfaces with the police, DA, PD, court, and service providers engaged in providing diversion, alternative to incarceration and/or voluntary services. This agency's CLS-facing work is governed by one or more MOUs. It will coordinate with LEAD and the Community-Supported Release Program.**
- **Completes an assessment prior to first appearance to determine what, if any, services are needed to help the person arrested not offend in the future;**
- **Acts as an advocate for the individual arrested and makes a recommendation at first appearance to the DA, PD and Court for ROR, bail and/or diversion if warranted and desired by the arrestee;**
- **Assumes the case manager, navigator, advocate, trouble shooter & monitoring role in formal diversion/alternatives to incarceration;**
- **Is the link between the person who is offered Diversion and the DA Diversion staff;**
- **Advocates for the person in diversion to the DA office and to the service providers;**
- **Offers directly or through referral, other voluntary support services the person needs to help them succeed in and beyond formal diversion/alternatives to incarceration.**

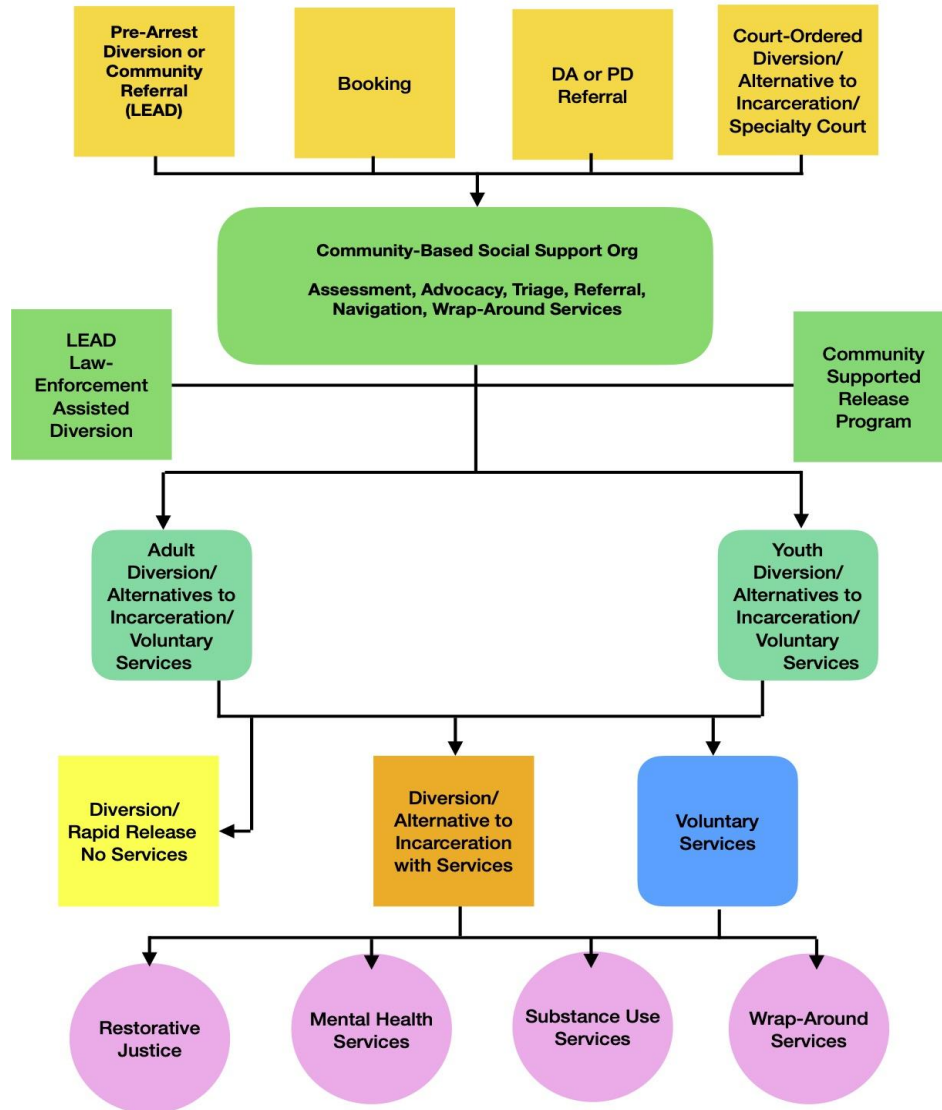
The purpose of the organization is to minimize initial CLS exposure and to assess the social supports needed to minimize future CLS involvement. Diversion without services should be offered to adults and children for whom services are not needed to prevent future CLS involvement.

Specialized teams may be needed to provide services for youth, individuals with mental illness, and individuals who have been trafficked or engaged in sex trade. Specific types of community-based clinical or diversion services may include: restorative justice, mental health services including trauma treatment, substance use disorder treatment services, housing, educational services, employment services, family support services, and youth-specific services.

Over time, the community-based social support and case management system should increasingly take on the coordination and case management role focused on root causes and primary prevention of crime. This should occur as the community decriminalizes behaviors that were not considered criminal in the past and can be better dealt with by systems other than the CLS. Appendix C is a living document that describes existing community-based agencies that offer such services.

Figure 3 shows the role of this community-based social support organization within the ecosystem. This agency's CLS-facing work is governed by one or more MOUs. It will coordinate with LEAD and the Community-Supported Release Program.

Figure 3. Community-Based Social Support System



Funding

Where possible, program costs for services should be covered by other existing public programs (e.g. Medicaid, Medicare and private insurance reimbursement for reimbursable services). Given that 85% of individuals arrested in Orleans Parish qualify for Public Defender services, it is anticipated that most will qualify for Medicaid which can be used to cover the costs of the clinical services described below. However, the **City should provide the funding needed for wrap-around and other services** that are not reimbursable from these sources. **Funding to stand-up and sustain needed capacity should be provided by the City to support the services described below.** Supplemental grant funding will be necessary in the early phases of development, but the goal over time should be for these services to be funded entirely by the government as an alternative system to prosecution and incarceration. **Funds saved in the CLS should be recouped and used to fund these services.** It is anticipated that these services and their funding will be ramped up over a period of a few years as capacity is increased and as more and more individuals are shifted from CLS-involvement to non-punitive community-based services outside the CLS. As this occurs more and more, funding should be available to be shifted from the CLS to the community-based services.

Challenge to Policy Makers

Policy and Services: Key policy makers in Orleans Parish including the DA, sheriff, police superintendent, judges, mayor and city council members, should embrace the recommendations in this Report and work with service providers, advocates and the public to phase in the recommended services and policies as rapidly as possible. Policy makers and advocates should make a commitment to assuring that services are evidence-based, delivered by qualified staff.

Funding: Philanthropic leaders and organizations are strongly encouraged to work collaboratively to invest in standing up the capacity and services needed to implement the recommendations in this Report. Policy makers are urged to assure that public funding for these services is phased in over a five year period to build on philanthropic investments and to create a sustained and resilient funding source for the system and services described. Policy makers should further monitor carefully the actual and potential savings in the CLS locally due to implementation of these recommendations and reprogram funding from various components of the CLS to establish sustained and durable funding lines for this system.

Data and Transparency: Policy makers are urged to support and fund the collection of meaningful data by the community-based organizations involved in this system and to make that data publicly available in a timely fashion along with data from the various components of the CLS locally so that system-involved people, advocates, the general population as well as policy-makers can judge the effectiveness of the services, programs and policies and make changes as needed to enhance effectiveness and success.

Transition Over Time to Primary Prevention: It is anticipated that over time, the need for both prosecution and incarceration as well as diversion will decline with implementation of these recommendations. As that occurs, the enhanced service infrastructure should continue to be supported with public resources as it transitions to primary prevention, addressing the root causes of crime and preventing CLS-involvement for more and more citizens while making the community safer.

Major Types of Programs Needed

Restorative Justice Diversion: Accountability That Heals

The Center for Restorative Approaches (CRA) is implementing a pre-arrest and pre-charge diversion program to address the racial inequity and poor outcomes of the existing CLS and more effectively respond to crime. Restorative Justice Diversion (RJD) offers a viable, evidenced-based, and more cost-effective solution²⁹ to current criminal justice processes by redirecting cases that would otherwise result in criminal charges into a community-based resolution process. It is focused on attending to the needs of those harmed, holding offenders accountable, and strengthening the community through prevention, intervention, and reparation.

Restorative Justice (RJ) views crime as more than a breach of law. Crime causes harm to people, to relationships, and to the community, therefore, a just response must address these harms as well as the wrongdoing. With RJ, accountability is defined as accepting responsibility, answering to those you have caused harm, and taking action to repair the harm caused. It involves active accountability, rather than the passive accountability of punishment, and is focused on meeting the needs of crime survivors (victims) and healing harm done. **RJD is always voluntary** and should be available to anyone accused of a crime, who is willing to participate when the person harmed also is willing to participate or requests RJD for the case.

For responsible parties (people who have broken the law), hearing the harm caused by their actions directly from survivors and accepting responsibility for those actions is transformational. The experience of realizing the human impact of the harm caused and actively engaging in the process of reparation has demonstrated significant impact on decreasing recidivism.

Because RJ supports survivors in achieving self-identified healing and justice, it is not surprising that studies show lower levels of fear and post-traumatic stress symptoms when compared with participation in criminal proceedings. Studies also demonstrate reductions in stress-related health care costs.^{29,30} Both survivors and responsible parties express high levels of satisfaction with participating and lower rates of recidivism than the traditional CLS.^{29,30}

RJD Guiding Principles

- *Do No Harm:*
 - Safety of all participants is paramount.
 - Participation is not a legal admission of guilt.
- Ensure Participation is Voluntary

- Reduce Racial and Ethnic Disparities
- Ensure Wide Accessibility:
 - Should be available to anyone that wants to participate as long as both the responsible party agree to participation.
 - Should be widely available to all responsible parties not just to those who are most likely to succeed. Because participants are human and many of them are living with the impact of trauma, we acknowledge that some will not succeed initially. Prior “failure” should not exclude future participation.
 - Fees should not be a barrier to anyone’s participation and lack of payment should not be a cause for someone to “fail” the program.
- Delivered by a community-based agency: Restorative justice processes function best and are in alignment with the values and goals of restorative justice when operating fully outside of the legal system.
- Eliminate Net-Widening: Should not include participants who would not otherwise be charged.

RJD Case & Program Eligibility Recommendations

The Roadmap’s RJD case and program eligibility recommendations are adapted from Impact Justice.²⁹ The RJD program is both intended to create accountability to the self-identified needs of people harmed, while also ending racial and ethnic disparities in the legal system. Therefore, the types of cases that are ideal for diversion are those with a clear, identifiable person harmed and those crimes which most often result in people of color being incarcerated or placed on probation. The cases referred should be ones that would have been charged by the DA, otherwise the program results in net-widening.

Stages of the Process from Model RJD Programs:

Pre-Arrest Police Referrals

Source: [*Abbotsford Restorative Justice and Advocacy Association- British Columbia \(founded in 2001\)*](#)

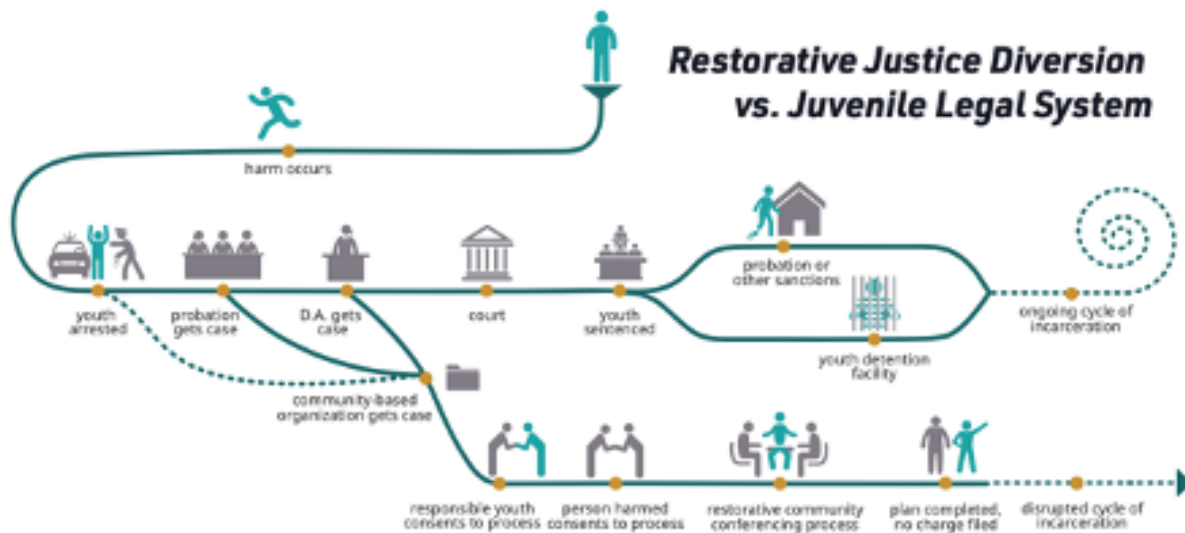
- **Step One:** After discussing the incident with both the victim and the one accused of the crime, the police officer refers the case (if appropriate) to Restorative Justice. In the case of a minor, this will also be discussed with the youth or child’s parents.
- **Step Two:** The responsible parties are contacted to determine if they are interested in proceeding with Restorative Justice.
- **Step Three:** The person(s) harmed is contacted to determine if they are interested in proceeding with Restorative Justice.
- **Step Four:** If both parties are willing, an initial private meeting will be set up with each of the parties to meet with a neutral facilitator. This allows each party to discuss privately what happened, what the impacts have been, concerns are discussed, and the victim is able to express what is needed to make things right. These meetings are confidential.
- **Step Five:** After at least one initial meeting with each party, the ARJAA team determines whether the case is appropriate or whether other approaches would be more effective.
- **Step Six:** The conference (circle) takes place, involving all affected parties, and may also include people close to them who are needed for emotional support. A typical conference can take 2.5 hours. The conference is a confidential process. After a full discussion of the incident, and the concerns and issues that surround the incident, the goal is to draft an agreement that repairs the harm. It is developed and agreed up by the group and signed by all parties.

- **Step Seven:** The person responsible for the incident fulfills the agreement, according to the timelines in the contract and under the supervision of ARJAA volunteers.
- **Step Eight:** When the agreement is fulfilled the matter is completely concluded. A closing report is sent to the police, and there is no criminal record. The person responsible receives a closing letter.

DA Referrals

Source: [Impact Justice- Oakland, CA](#) (founded in 2015)

Our restorative justice diversion programs are post-arrest and pre-charge, meaning that the young person who has committed harm has been arrested but has not been charged with a crime. Restorative justice diversion is most effective with **serious harms** (felonies and high level misdemeanors), which have a **clear, identifiable person harmed** such as **robbery, burglary, car theft, assault/battery, arson, and teen dating violence**. The young person is diverted by the local prosecutors office instead of being processed through the juvenile legal system. Restorative justice diversion programs are run by CBOs who are always independent of any law enforcement or systems agency. They are often local nonprofits experienced in supporting youth and are rooted in the communities they serve.



Once a case is referred to the CBO, trained facilitators inform the responsible youth and the person harmed of the decision to divert and the opportunity to participate in a Restorative Community Conferencing process. Once a case is completed successfully, the referring agency closes the case with no charges filed against the youth.

RJD MOU Recommendations

The RJD will be governed by an MOU negotiated between the RJD Program and the DA, PD, city (if the City is providing funding), and, for pre-arrest diversion, police department (see model MOU in Appendix D) . The MOU will address the following issues:

- **TYPES OF CASES:** This RJD model is intended for the most serious cases a DA's office is permitted by law to divert. Cases should have an identifiable person harmed (victim/survivor) and an offender (responsible party) who admits that they engaged in the offense in question. Cases in which the responsible party denies involvement are not appropriate. Burglary, robbery, assault, arson, car theft, and carjacking are types of cases for which this model is best suited. Because studies show that second-time offenses are most successful in the RJD process, the program will take cases for people who reoffend as well as for those charged with their first offense.³⁰
- **CONFIDENTIALITY/ "REVERSE MIRANDA":** Nothing a responsible party says at any point in the RJD process can be used against them.
- **PROSECUTING/ STATUS OUTCOMES:** The DA will not prosecute anyone whose case is currently being addressed through the RJD process.
- **Regular Reporting:** On a quarterly basis, the referring agency (e.g. the DA, police department, probation office, etc.) will receive a general status update for the cases it referred. If the responsible party fails to complete the reparation plan, the case will be returned to the DA, who retains the option to prosecute. Conferences, ideally, take place within eight weeks of the case referral (this may be longer depending on the complexity of the case).
- **CASE CLOSURE:** When a plan is completed, the DA will not file charges for that case.

Behavioral Health Services and Diversion Programs

Behavioral health includes mental health (MH) and substance use disorder (SUD) which may occur alone, or often in combination. People with mental illness and substance use disorder are more likely to be incarcerated and account for a disproportionate number of individuals in jails and prisons (see Appendix A).

Mental health issues may be due to Serious Mental Illness (SMI) which is defined by the [National Institute of Mental Health \(NIMH\)](#) as "a mental, behavioral, or emotional disorder resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities." Serious Mental Illness includes schizophrenia, bipolar disorder and major depression and tend to be long-lasting and require on-going medical management. Other mental illness tends to be less severely impairing and episodic requiring intermittent treatment. Since the mid-late 20th century, treatment of mental illness has evolved from long-term institutional care to out-patient medical management. This change in treatment was accompanied by public policy changes leading to closure of most mental health in-patient facilities without the establishment of adequate publicly-supported out-patient treatment capacity to meet current needs. Mental illness, especially un- or under-treated SMI, is often accompanied by difficulty maintaining relationships and employment leading to homelessness and public disorder offenses resulting in arrest and incarceration. While some with mental illness may be violent and commit serious violent crimes, most crime associated with mental illness is minor or public order crimes and are frequently related to poverty, homelessness and poor social adaptation related to these factors.³²

According to the [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#), substance use disorder (SUD) "occur[s] when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home." According to the National Institute on Drug Abuse (NIDA) not everyone who has used drugs or alcohol needs treatment.²⁵ When treatment is necessary, it should be offered in community-

based settings which is known to reduce future CLS involvement; treatment in the CLS is often non-existent or inadequate. Treatment should be individualized and while monitoring and feedback may help those in treatment succeed in achieving sobriety, multiple rounds of treatment are often needed before lasting sobriety is achieved. Forced sobriety rarely results in lasting recovery and treatment is often punctuated by lapses and relapses. Positive rewards are more effective in helping individuals achieve recovery than punitive approaches. While drug testing is an effective tool in some clinical programs, the appropriate response to a positive drug test is a clinical response with consideration of modifying treatment approach.²⁵

People with MI and SUD are more likely to be incarcerated and account for a disproportionate number of individuals in jails and prisons (see Table below). Appropriate behavioral health services should be offered on a voluntary basis as well as in formal diversion programs. Some but not all of the following recommended services are currently available in or near Orleans Parish (current service providers and their services are listed in Appendix C). We recommend building on what we currently have and expanding the capacity of qualified agencies, while filling in the gaps with new services.

Recommended behavioral health services include:

- Co-Responder/Psychiatric Emergency Response Teams (PERT) as a next step beyond [Crisis Intervention Teams \(CIT\)](#)³² at NOPD: Evidence shows that people with untreated mental illness are far more likely to be involved in fatal officer-involved shootings.³³ Los Angeles County has used a co-responder model involving mental health workers with police back-up for many years ([Systemwide Mental Assessment Response Team, SMART](#)) which has resulted in more treatment and less incarceration. More recently San Diego County developed [PERT](#) in 2015 to “to provide the most clinically appropriate resolution to the crisis by linking people to the least restrictive level of care that is appropriate and to help prevent the unnecessary incarceration or hospitalization of those seen.”³³
- Stabilization Facility (Secured/Unsecured) with Long-Term Capacity
- Social Work Evaluation & Triage at Booking (Recommended to be provided by the **Community-based Social Support, Assessment, Triage, Navigation & Referral Organization** (see Figure 3))
- Mental Health Diversion Facility (Patterned after [Miami-Dade Forensic Alternative Center](#)) serving adults with serious mental illnesses who have histories of repeated involvement in the justice, acute care treatment, and/or homeless systems; and who are:
 - Involved in, or at risk of becoming involved in, the justice system.
 - Diverted from the Orleans Justice Center either pre-booking (by law enforcement) or post-booking (by the courts).
 - Assessed to be at moderate to high risk of future recidivism to the justice system and institutional settings.
 - Screened for significant histories of violence and likely to pose public safety concerns.
 - Services to be Provided: The facility will house a comprehensive array of treatment and support services including:
 - Central-receiving center designated specifically for law enforcement and fire-rescue.
 - Screening and assessment to identify individual risk factors and needs.
 - Integrated adult crisis stabilization unit and addiction receiving facility.
 - Various levels of residential treatment.
 - Outpatient behavioral health and primary care treatment.
 - Day treatment and day activity programs.

- Crisis respite services.
 - Employment/vocational training services.
 - Treatment for co-occurring substance use and trauma-related disorders.
 - Expedited access to state and federal entitlement benefits.
 - Community re-entry support services to assist individuals with linkages to basic needs after discharge, including ongoing treatment, housing, medications, clothing, and food.
 - The facility will also provide space for the courts and social service agencies (e.g., housing providers, legal services, and immigration services) that will address the comprehensive needs of individuals served.
- Mental Health Transitional Residential Care Beds
 - Level 1: Secured Residential Treatment Beds (24/7)
 - Level 2: Unlocked Residential Treatment Beds (24/7)
 - Level 3: Licensed Board & Care Beds
 - Level 4: Unlicensed Board & Care Beds
- Permanent Housing:
 - Single room occupancy (Permanent Supportive Housing)
 - Independent Living
- Out-Patient Primary Mental Health Treatment
- Out-Patient Primary Substance Abuse Treatment²⁴
- In-Patient Substance Abuse Detox & Stabilization
- In-Patient Substance Abuse Treatment:
 - 30 Days
 - 90 Days
- Out-Patient Intensive (i.e. day treatment) Substance Abuse Treatment
- Out-Patient Substance Abuse Treatment
- Out-Patient Narcotic Maintenance Treatment: Methadone, Suboxone
- Adolescent out-patient Substance Abuse Treatment
- Adult residential Substance abuse treatment
- Therapeutic community Substance Abuse Treatment
- 12-Step Programs
- Peer Navigators

Youth Diversion Programs: Special Considerations

The [goal of the juvenile justice system](#) is to rehabilitate, not to punish. Youth diversion programs should be grounded in the belief that all young people are capable of being positive, contributing members of society. Cognitive research shows that adolescent brains are not fully formed. Taking risks and testing boundaries is a natural part of adolescence.^{34,35} While young people should be accountable for their actions, overly harsh and punitive responses do more harm than good. Youth diversion programs should be minimally invasive and demanding, and should take an assets-based approach.

Key Takeaways from the Academic Research on Youth Diversion

Research has shown that youth diversion programs across the country vary widely in their effectiveness at reducing recidivism.³⁶ This is because “diversion” is a broad term encompassing many different approaches and programs are often implemented inconsistently. Moreover, there *are* potential harms associated with poorly designed diversion programs.³⁷

The first potential risk of youth diversion programs is “net-widening.”^{37a} With the existence of a robust diversion program, system actors may be inclined to refer kids to diversion whose cases otherwise would have been dismissed, ultimately resulting in *more* rather than *less* involvement with the CLS. Those who are tasked with referring participants to diversion should be well-trained to distinguish between youth who simply need a warning or accountability for their actions, versus those who are in need of programming and services. There is lower risk of net-widening when there is a clearly defined target population, including exclusion criteria.

Relatedly, a second potential harm is that youth diversion programs may require overly intensive services for low-risk youth. Many first-time offenders are unlikely to reoffend. Requiring extensive services may be unnecessary, burdensome for families, and costly to the system. Decisions about which youth need intervention via a diversion program also run the risk of following patterns of racial discrimination seen elsewhere in the CLS. To mitigate against burdensome and unnecessary interventions, youth diversion programs should not take a one-size-fits-all approach.

The research points to the need for careful planning. Several factors have been shown to be associated with greater effectiveness at reducing recidivism rates. First, research suggests that youth diversion programs are more effective when they have a rehabilitative and therapeutic orientation focused on nurturing skills and relationships, rather than a punitive orientation focused on deterring bad behavior.³⁸ Programs that include mentoring and family involvement are also associated with better outcomes.

The performance and practices of diversion programs should be evaluated by observing outcomes and making sure specified methodologies are consistent with the concepts of diversion. Mears et al.³⁷ found

that diversion programs were more successful when they monitored program implementation through the use of a program manual, researcher involvement, and other means of fidelity monitoring. This suggests the benefits of involving a research or university partner to assist with training, supervising, and/or evaluating the youth diversion program.

Youth Diversion Program Recommendations & Considerations

Figure 4 shows an overview of the “off ramps” from the juvenile justice system and the key points at which diversion may occur. In order to realize the full benefits of diversion, the Roadmap recommends that diversion should primarily occur pre-arrest or pre-petition.

Figure 4. Juvenile Justice System Off Ramps – Key Decision Making Points

Juvenile Justice System Off Ramps: Key Decision Making Points

Referral to diversion can occur at any time up until trial, but it should occur as early in the process as possible. This graphic illustrates the options for diversion referral decision points.

Juvenile Court Off-Ramps	Decision Points	Key Considerations
<p>Community-Based Organizations Crisis Care</p>	<p>Prevention</p> <p>Well-funded support services and programs are in place to prevent initial contact with the juvenile justice system.</p>	<ul style="list-style-type: none"> The same community-based organizations may be used in prevention and diversion programs.
<p>Contact with Law Enforcement</p> <p>Warn & Release Arrest Refer to Pre-Arrest Diversion</p>	<p>Pre-Arrest Referral</p> <p>DA authorizes police to refer cases to diversion as an alternative to arrest, according to specified criteria.</p>	<ul style="list-style-type: none"> Police should still opt to warn and release in instances when intervention is unnecessary. If a child is required to receive a Juvenile Warning Notice, as specified in the PAY ordinance, they should not also be referred to pre-arrest diversion.
<p>Intake</p> <p>Detain Release</p>	<p>Intake</p> <p>At juvenile booking, the court determines whether or not the child will be detained or released while their case proceeds.</p>	<ul style="list-style-type: none"> The court should not detain any child who meets criteria for diversion. DA staff could be placed in intake to conduct diversion screening at the time of arrest.
<p>Pre-Petition</p> <p>Dismiss Petition Refer to Diversion</p>	<p>Pre-Petition Referral</p> <p>The DA refers cases to diversion as an alternative to prosecution, according to specified criteria.</p>	<ul style="list-style-type: none"> The DA should not refer cases to diversion that would not otherwise be prosecuted due to insufficient evidence. Pre-trial referral should happen prior to the filing of a petition.
<p>Post-Petition</p> <p>Adjudication Refer to Diversion</p>	<p>Post-Petition Referral</p> <p>The DA retains the option to end the prosecution and refer cases to diversion at any time before an adjudication is finalized.</p>	<ul style="list-style-type: none"> Post-petition diversion referral is a last resort. Diversion should occur earlier in the process to avoid the negative consequences of formal court processing. Post-petition referral should never require a guilty plea.

The extent of intervention required by the youth diversion program should vary. The programming should be responsive to the child's needs but it must also be proportionate to the alleged offense and prior history. The youth diversion program should offer multiple tracks. Kids who have low-level charges and haven't been in trouble before should not be required to be in unnecessarily long programs, whereas kids with a history in the system and/or more serious charges should have access to more intensive programming rather than assuming they require prosecution.

Youth diversion programs should not exceed three months and requirements may be accomplished in as little as one session, depending on the charge. While longer-term involvement in youth development programs and support services may be beneficial to many young people who are referred to diversion, extended involvement in the justice system is not. Youth and their families may be referred to *voluntary* services and programming in addition to diversion requirements to maximize the benefits of diversion. However, young people should be able to resolve their cases and be removed from CLS supervision as quickly as possible.

Once a young person is enrolled in the diversion program, developmentally appropriate assessments should be used to determine requirements. For those requiring more extensive interventions, a case manager will play a critical role in helping youth and their families navigate diversion program requirements. Case managers should have strong relationships with community-based organizations to ensure young people's needs are met.

Diversion program requirements may include one or all of the following components:

- **Behavioral Health and Support Services:** Youth should have access to youth-tailored services coordinated by a case manager and individualized to each young person's needs, including trauma-informed therapy and mental health treatment, substance abuse treatment, family counseling, school or home visits, or other support services. These services should be coordinated through staff who are specially trained to work with children and adolescents and their families within the ***Community-based Social Support, Assessment, Triage, Navigation & Referral*** organization (see Figure 3).

In New Orleans, trauma-informed treatment is a critical need. Specialized training in trauma-informed treatment is highly effective, but can be cost-prohibitive to many community-based agencies that serve children. Providing funding for community-based clinicians to obtain training would greatly increase the capacity of local providers and ensure quality of care for youth diversion program participants.

Although substance abuse treatment may be necessary in rare cases, drug testing should not be required for all diversion program participants as a condition of diversion or alternatives to detention. Most children do not suffer from serious addiction problems and their drug use is more appropriately addressed through trauma-informed care.

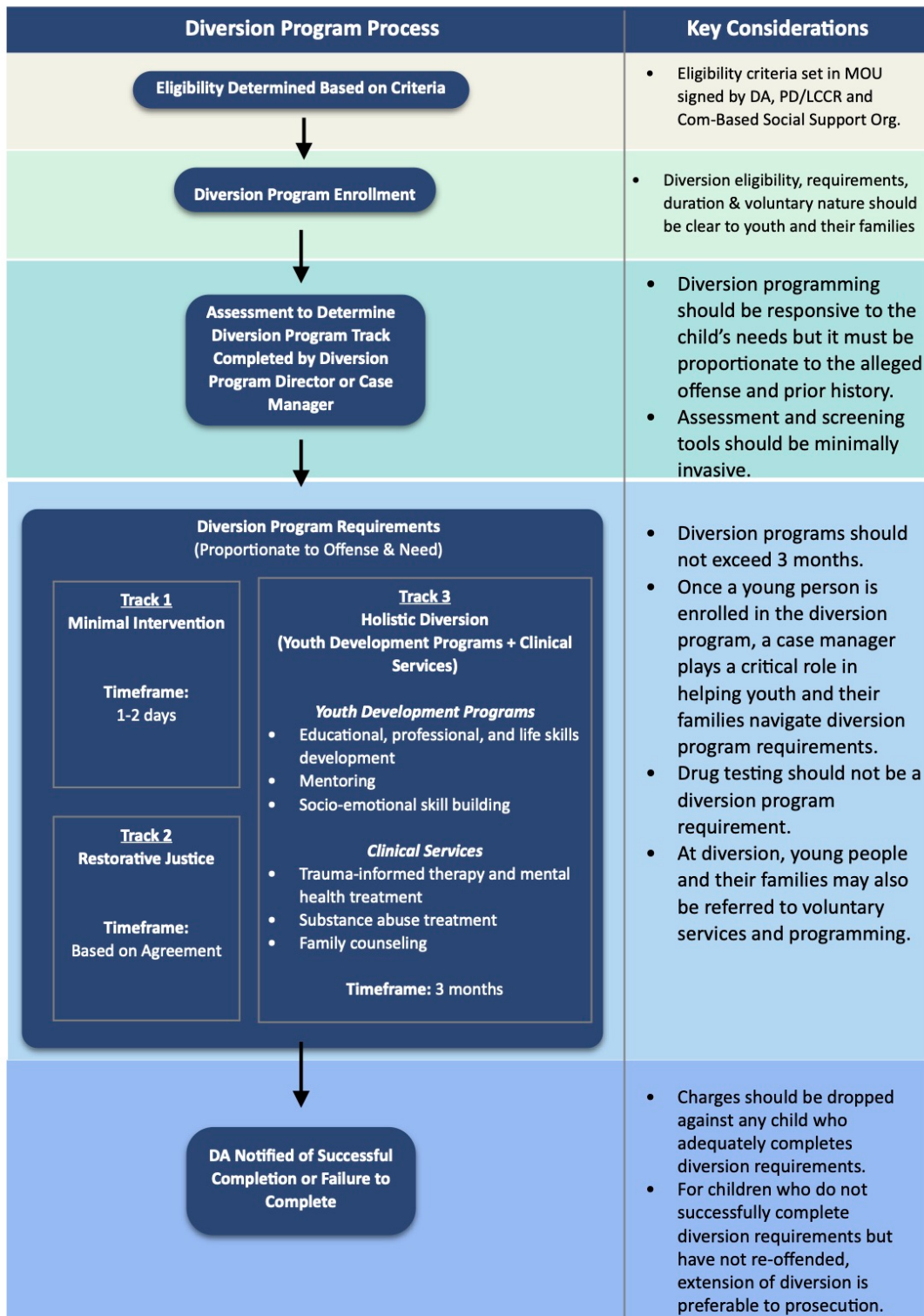
- **Restorative Justice:** Restorative justice is especially effective and developmentally appropriate for young people and should be provided through a qualified community-based organization and not within the DA office or court. During restorative circles, youth participate in a facilitated dialogue with everyone who is impacted by the incident. The restorative circle focuses on reparation of harm and results in a shared agreement developed by victims of the incident, the young person, and their families when appropriate. Youth are held accountable to the agreement, with the support of their case managers and families. Restorative justice is a trauma-informed approach that offers young people a chance to repair harm while avoiding the negative consequences of CLS involvement.
- **Youth Development and Enrichment Programs:** Community-based programs that are grounded in the framework of positive youth development should play a role in youth diversion. Positive youth development programs focus on fostering skills and resilience by helping youth undertake new roles and responsibilities in their community.³⁹ They also provide social and emotional support to ensure that participants develop positive identities and expectations for their future.

Youth and their families should be able to choose from a variety of programming opportunities offered by community-based organizations. This increases the likelihood that the diversion program will fit the young person's needs and interests and develop their skills and capacities.

There are numerous high-quality youth development programs in New Orleans that offer educational, professional, and life skills development. These include Youth Empowerment Project, Grow Dat Youth Farm, and Roots of Music, among many others.

Figure 5 shows an overview of the youth diversion program process and key considerations.

Figure 5. Youth Diversion Program Process and Key Considerations



Youth Diversion Program Barriers

The following **system-wide barriers** need to be addressed to respond to the needs of youth in diversion programs:

- **Transportation:** To be successful, diversion program youth must have reliable transportation to community-based organizations. This is an especially formidable challenge within the charter school system because many students must already travel far distances from their neighborhoods to their schools. This challenge can be addressed if programs provide transportation, and if we ensure that there are high-quality community-based programs offering diversion in every neighborhood. New Orleans East is particularly in need of programming options for kids.
- **Funding:** Many community-based organizations are unable to take referrals consistently year-round, often due to funding or organizational capacity constraints. Community-based organizations must have stable funding to reliably serve young people through diversion.
- **Mentoring:** For many reasons there is a significant gap in access to youth mentoring programs across the city. One challenge is that mentoring programs often rely on volunteers who are necessarily limited in the amount of time they can spend with their mentees. However, the Youth Empowerment Project currently has a grant from the state of Louisiana to serve 12-14 youth in a mentoring program through the prior DA's diversion program. There is greater need than the Youth Empowerment Project can provide, but the mentoring program could be expanded with supplemental funding.

Spotlight: Arts-Based Youth Diversion Programs

In a city as culturally rich as New Orleans, the arts hold particular promise for building resilience and promoting the wellbeing of youth and families. Research shows that the arts are especially effective at developing socio-emotional skills, including self-management and discipline, interpersonal and relationship skills, and self-expression and identity.⁴⁰ Arts-based youth diversion programs are effective at reducing recidivism³⁸ and improving mental health, behavior, academic performance, and family functioning.⁴¹

The Arts Council New Orleans, the City of New Orleans' designated arts agency, received a small grant to research and design an arts-based youth diversion program through its Young Artist Movement program. Young Artist Movement is a public art program that provides engaging arts education and workforce development opportunities to New Orleans youth. Through a project-based learning model, youth work alongside professional artists to create vibrant, inspiring, and thought-provoking public art, including murals, sculptures, and digital projections. Each public art project develops the creative and professional capacities of youth, beautifies neighborhoods, and builds community pride and cohesion. The Arts Council's Young Artist Movement program is championed by experts in the fields of youth development, public art, education, and justice. Through its partnership with local alternative high

schools, the program has focused on prevention programming; the diversion program is a natural extension of this work.

By enhancing the lives of young people through the arts, the natural byproduct is reduced recidivism and improved public safety. The Arts Council's Young Artist Movement program achieves this by:

- Cultivating young people's sense of belonging and connection to their community as they transform public spaces through beautiful art and express their voices in a positive way.
- Promoting socio-emotional wellbeing through a caring and creative environment.
- Teaching youth tangible professional and entrepreneurial skills that expand their future job and educational prospects.

Arts programming such as that offered by Young Artist Movement should be one of the multiple types of youth development programs offered through community-based organizations.

Arts-Based Diversion Program Models

There are several arts-based diversion programs that can serve as models for New Orleans.

The [Prodigy Cultural Arts Program](#) was established in 2000 and is offered in 10 locations throughout West Central Florida. Prodigy is a research-based primary prevention and diversion program for at-risk youth ages 7-17. Prodigy uses visual and performing arts as a way to help young people develop life skills such as communication, leadership, problem solving, anger management, career, and goal setting. Each art class is conducted by a professional artist who serves as a mentor and teacher. Through art, young people build self-confidence, learn how to showcase their skills and develop lifelong positive habits for future success. The diversion program is 3 hours/week for 8 weeks. Several studies have found the Prodigy program to be effective in reducing mental health symptoms, improving academic self-efficacy, reducing recidivism, and improving overall family functioning. Over 95% of young people enrolled do not have contact with law enforcement and for those who have committed a minor offense, over 89% do not reoffend. Additionally, Prodigy offers a cost savings of over 160 million dollars to taxpayers in Florida when invested in up front prevention cost to support juveniles (less than \$1,600 per youth) versus over \$60,000 per youth for incarceration.

[Project Reset](#) was established in 2015 in New York City. Project Reset is a diversion program offering a new response to a low-level arrest that is proportionate, effective, and restorative. Project Reset serves people who are issued desk appearance tickets (DAT) for low-level, nonviolent crimes, including shoplifting, trespassing, and criminal mischief. Project Reset began by serving 16 and 17 year-olds, but has since expanded to adults. The program is a short intervention of one or two 2-hour sessions. Teaching artists guide participants through arts activities and immersive conversations that encourage self-reflection and community building. Participants are offered additional resources at the time of the intervention. Since its launch in 2015, Project Reset has helped more than 4,500 individuals dispose of their DAT misdemeanor cases without appearing in court. According to projections, diversion programs like Project Reset save \$3,500 in case-processing expenses *per case*, or \$5.8 million annually.

Arts-Based Youth Diversion Program Structure

Below is an overview of the proposed structure of the Arts Council's Young Artist Movement diversion program:

- Over the course of the 12-week program, youth will collaborate with a professional artist mentor to research, design, and install a work of public art for their community. The program curriculum builds multiple skills, including:
 - **Art & design** skills through the creation of public art;
 - **Socio-emotional** skills by infusing the arts with opportunities for reflection and by working with young people from different backgrounds and neighborhoods;
 - **Digital literacy** skills through writing professional e-mails, conducting online research, or creating marketing materials and digital mock-ups of artwork;
 - **Leadership** skills by beautifying communities and creating art about civic issues.
- All youth receive a stipend for their participation, regardless of how they are referred to the program. Stipends enable young people to participate who might not otherwise be able to because of family or work obligations. In the process of earning money, young people learn valuable professional and entrepreneurial skills.
- After the initial 12-week program, participants remain involved through additional paid opportunities.
- Youth referred through diversion are not separated from other youth in the program. However, diversion participants may need to fulfill additional requirements as determined by diversion program service providers. Diversion participants will also receive additional services, as needed, coordinated by a case manager tailored to each young person's needs, including art therapy, school or home visits, family counseling, or other services.
- Youth choose between mural painting, photo/video, design/build, graphic design/digital media, dance, and music production tracks. Community organizations specializing in these art forms – such as NOVAC and Dancing Grounds – will be recruited for instruction.
- The program involves families during the program orientation, community design and paint days, and a community unveiling celebration.
- The program recruits professional artists to serve as mentors. These artists are practicing creative professionals who are committed to teaching and mentoring young people through the creative process. Professional artist mentors and arts educators will be trained in classroom management, lesson planning, socio-emotional skill-building through the arts, and trauma-informed practices.
- **Program Eligibility:** Youth ages 14-17 who meet the criteria for diversion. Youth must show an interest in the arts, but they do not need to have any prior experience or formal training in the arts.

Juvenile Diversion Case Study: Jefferson Parish

In 2013, the Jefferson Parish District Attorney's (JPDA) office developed and implemented a plan to increase the number of youth that could be successfully diverted from formal system processing. JPDA articulated four goals:

- Increase the percentage of prosecutable referrals that are sent to the Pre-Trial Diversion Unit instead of pursuing formal processing
- Expand capacity of the Pre-Trial Diversion Unit to take on more cases by reducing the amount of time youth spend in Diversion
- Reduce likelihood that diverted cases will return to court
- Improve outcomes and more effectively address the reasons youth end up in Pre-Trial Diversion, without net-widening

Despite a specific goal of increasing the use of diversion, this effort did not initially involve expanding programming or hiring additional staff. Instead, they focused on restructuring the program to help youth move through diversion more quickly and with greater success. At the same time, the criteria for diversion eligibility was reviewed and revised, expanding diversion access to youth with prior delinquency history and youth charged with certain nonviolent felony offenses.

Prior to 2013, juvenile diversion in Jefferson Parish was extremely limited, one-size fits all, and frequently lasted over a year. This excessive length of time meant that program slots did not turnover very frequently, reducing the number of youth that could be served over the course of a year. The lengthy, one-size fits all program was replaced with a multi-faceted, multi-tiered approach that could be tailored specifically to the needs of each youth. They created four diversion "tracks" that a young person could be assigned, depending on the nature of their specific case:

1. Abbreviated Diversion: Short-term (i.e., 1-2 days), in-house interventions focused on behavior that brought youth to system. *Ex: 1 day intake + 1 day shoplifting program*
2. Substance Use Track: Assessment and target level of need from low to high intensity. Solely for youth arrested on drug-related charges or youth for whom substance abuse is clearly the driving factor in their delinquent behavior.
3. Traditional Diversion: three-to-six months possible in-house and community based services
4. Community Conferencing/Restorative Practices: Facilitated conversations with everyone impacted by the incident, concluding with an agreement between all parties to repair the harm caused by the event. Focus on victim voice and youth accountability.

The results were immediate and striking. At the end of 2013, the number of youth successfully completing diversion had increased exponentially.

Since 2013, the percentage of cases referred to diversion have continued to increase. The increase in referrals to and successful completions of diversion have helped to reduce the number of youth that are placed on probation. The number of referrals to diversion have actually exceeded the number of cases assigned to probation.

This means that probation officers have smaller caseloads, so they are able to provide better case management and supervision. Additionally, there was reduced demand for the programs and services that are contracted by the Department of Juvenile Services (DJS) specifically for youth on probation. As a result, DJS offered access to those services for youth in diversion. DJS has saved money in reduced program costs. Overall, the changes to diversion have had a significant, positive impact on the juvenile justice system in Jefferson Parish:

- Interventions are in place approximately four months sooner for youth in diversion than for adjudicated youth.
- 73% of youth diverted to evidence-based practices from probation successfully completed diversion.
- Juvenile arrests have dropped 37%, from 2008-2015
- Probation caseloads fell 52%, from 2011-2015
- Treatment costs dropped 16%, from 2011-2015

Although Jefferson Parish is unique due to its millage and local juvenile justice agency (DJS), much of what the diversion program accomplished can be replicated in other parishes, even if they do not have the same resources. Restructuring programming and moving youth through diversion more quickly will maximize capacity and allow jurisdictions to serve more youth without spending more money.

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Appendix A: Number of People Potentially Eligible for Diversion in Orleans Parish

Diversion can occur pre-arrest or at several times post-arrest and before trial. According to the NOPD Consent Decree Dashboard, from 2017 to 2019 an average of:

- 55,595 people have been stopped,
- 4,615 were issued summons (2018 and 2019 only),
- 14,813 were issued citations,
- 18,922 were issued warnings, and
- 8,787 arrests were made.

An average of 17,334 individuals were reported arrested (2017-19) according to Datalytics and the OPSO Dashboard.

Of the arrests made from 2017 to 2019:

- 2,691 were for serious violent crimes,
- 8,206 were for property and other nonviolent crimes,
- 1,020 were for other assaults,
- 1,463 were for felony charges,
- 277 were for misdemeanor drug abuse charges,
- 1,417 were for domestic violence, and
- 2,695 people were arrested on warrants or attachments.

Up to 14,800 (85.4%) of these arrests, and a minimum of 9,946 (57.4%), appear to be potentially eligible for early release from jail pre-trial and/or pre-trial diversion which could drastically reduce the number of individuals in jail pre-trial (and overall) and also drastically reduce the case load for the Courts and to a lesser extent, the case burden for the DA and PD Offices.

Cases diverted from prosecution also place lower burdens on the DA office, the Orleans Parish Criminal Courts and, for 85% of cases, on the Public Defenders' Office (PD). In 2019, according to the Louisiana Supreme Court's Annual Report, the DA's Office reported that it screened 11,981 criminal cases, of which 3,888 (32.5%) were filed in criminal court.

The total DA Office budget was \$12.41M including \$6.68M from City appropriations. The average cost in 2019 of the DA's office per case:

- Screened was \$1,036
- Criminal case prosecuted \$3,192.

The Orleans Parish Office of Public Defender budget was \$1.8M for an average cost per case screened of \$150 or \$463/case prosecuted.

The 2019 Budget for Criminal District Court was \$6.91M (total \$7.1M in 2018 including state allocations) and for the Clerk of Criminal District Courts was \$3.73M for an average cost combined of \$2,551 per case. (Except where noted, the budget figures include city allocations only.)

The Orleans Justice Center (OJC) and Orleans Parish Sheriff's Office's 2019 city budget was \$53.19M with 15,637 intakes and average daily census of 1,231 which equates to \$3,402/intake or \$118/incarcerated person per inmate day. The total OPSO budget including city and other sources was \$86.4M and the total daily cost at OJC was \$189.⁴² The mean number of days in OJC in 2017 for pre-trial detainees was 216 days (most recent year data available) which cost an average of \$25,488 for every person held in OJC pre-trial. The marginal cost/day for persons held in OJC was \$33/person/day in 2018.⁴³ This means that as the number of persons held are reduced by small numbers, savings will approximate the marginal cost while far greater savings are possible if the number of pre-trial detainees and/or length of pre-trial stay is reduced by large numbers since that would allow for savings on personnel, utilities, medical care as well as the marginal costs of meals, etc. People who are denied release on their own recognizance, on personal security bonds, or on bail can be held in jail until charged by the DA at arraignment, which by law can be up to 90 days for misdemeanor offenses and 120 days for felony offenses.

Since the city budget contribution is \$118/inmate/day, the overall cost to the city for pre-trial detention in 2019 is estimated to be approximately \$49-50M. According to The Vera Institute's report Paid in Full, based on marginal costs, \$3.7-8.3M could be saved annually by "eliminating unnecessary incarceration that results from a reliance on money bail and unnecessary probation detention."⁴³ Additional savings are possible with robust assessment and advocacy for early release, diversion and alternatives to detention.

The Orleans Parish Public Defenders Client Services Division 2019 Report indicated that using marginal daily jail costs, earlier release of the 138 individuals for whom they arranged pre-trial release to a substance abuse treatment facility could have avoided the 34.6 days/person (4,775 total days in 2019) spent in OJC prior to release and saved \$157,575. Jails costs saved with a larger early release/diversion program would be expected to save closer to the \$806,975 to detain these 138 individuals prior to pretrial release.

The Table below indicates the average number of police calls, contacts, and arrests for each type of offense to provide a more complete picture of the number of individuals and by type of charge that are potentially eligible for diversion.

Estimated Annual Diversion Service Needs-Orleans Parish

Source of data on Mental Health (MH), Serious Mental Illness (SMI) and Substance Use Disorder (SUD): Vera Institute's Publication, Incarceration's Front Door: [The Misuse of Jails in America](#)³¹

	Est %	Arrests/y Low	Arrests/y High	Divertable Low	Divertable High	Not Divertable Low (Violent Crime)	Not divertable High (Violent Crime)	Services Needed
Needs	#	10000	12000					
Mental Health Disorder	0.6	6000	7200	5796	6955	204	245	
SMI		1615	1938	1560	1872	55	66	Acute/Chronic MH Care
Male	0.145	1305	1566	1261	1513	44	53	
Female	0.31	310	372	299	359	11	13	
Non-SMI		4385	5262	4236	5083	149	179	Sub-Acute MH Care
Co-Morbid SUD	0.72	4320	5184	4173	5008	147	176	
SMI with Co-Morbid SUD		1163	1395	1123	1348	40	47	Acute/Chronic MH Care + SA Treatment
SMI Using drugs/EtOH at arrest	0.34	395	474	382	458	13	16	Detox + Acute/Chronic MH Care + SA Treatment
SMI Using drugs+EtoH at arrest	0.15	174	209	168	202	6	7	Detox + Acute/Chronic MH Care + SA Treatment
Non-SMI with Co-Morbid SUD		3157	3789	3050	3660	107	129	Sub-Acute MH Care + SA treatment
Non-SMI Using drugs/EtOH at arrest	0.34	1073	1288	1037	1244	36	44	Detox + Sub-Acute MH Care + SA treatment
Non-SMI Using drugs+EtoH at arrest	0.15	474	568	457	549	16	19	Detox + Sub-Acute MH Care + SA treatment
Homeless	0.17	1020	1224	985	1182	35	42	MH Care + Housing
Unemployed	0.333	1998	2398	1930	2316	68	82	MH Care + Job Assistance or assistance applying for disability
SUD Total	0.68	6800	8160	6569	7883	231	277	
SUD alone		2480	2976	2396	2875	84	101	Substance abuse treatment
SUD Using drugs/EtOH at arrest	0.34	843	1012	815	977	29	34	Detox + Substance abuse treatment
SUD Using drugs+EtoH at arrest	0.15	372	446	359	431	13	15	
No HS diploma or GED	0.47	4700	5640	4540	5448	160	192	Educational Assistance
Total (Mental illness + SUD only)		8480	10176	8192	9830	288	346	
Excluding violent crime (3.4%)		8192	9830					
Non-violent crime without MI or SUD		1468	1762					
Total divertable excluding violent crimes		9660	11592					
% of Total		0.966	0.966					

According to the Vera Institute's publication, *Incarceration's Front Door*, it is estimated that 60% overall of persons arrested and jailed have a mental health disorder and 14.5% of males and 31% of females arrested have a serious mental illness (SMI). Of these a third are unemployed, 17% homeless, and 72% also have a substance use disorder (SUD). 68% of those arrested who have no mental health disorder have SUD. Forty-seven percent of people arrested have less than a high school diploma and many are functionally illiterate. Additionally, rates of recidivism are significantly increased when people with any form of mental illness are arrested instead of receiving treatment. Total arrests by NOPD have been trending down somewhat over the last few years and the jail population has declined as well, most dramatically during the first six months of the COVID-19 epidemic. However, NOPD's arrest data do not fully correspond to the number of intakes annually at OJC, which are considerably higher. This is presumably because there are a number of policing organizations (e.g. State Police, Levee Board Police, Special Security Districts) that operate in and make arrests in Orleans Parish. Based on an estimate of 10,000-12,000 arrests/jail intakes annually going forward, it is reasonable to estimate that there will be 1,468-1,762 arrests each year that are for nonviolent crimes and potentially divertable who have neither a mental health nor SUD, 1,560-1,872 with SMI and 4,236-5,083 with other mental illness (with and without SUD) who are potentially divertable and 6,569-7,883 with SUD alone who are potentially divertable.⁴⁴

While the Orleans Parish Public Defender's Office (OPD) currently provides services for about 85% of people prosecuted in Orleans Parish, the Client Services Division (CSD) has the resources to advocate for diversion and provide referral for a fraction of the people served. CSD reported that in 2019, of their clients:

- 64% reported drug or alcohol addiction,
- 58% reported diagnosis with a mental health disorder or personality disorder,
- 35% were homeless and
- 35% were on probation or parole at the time of arrest.

During 2019, as a part of their social service case objectives they accessed 21 different community resources, 288 times for social services or programs and made referrals:

- 179 for pretrial substance abuse treatment,
- 45 for mental health treatment,
- 12 for housing,
- 11 employment,
- 3 for education services and
- 35 for youth services

As part of alternatives to incarceration, CSD made 60 referrals, including:

- 34 for substance abuse treatment,
- 21 for mental health treatment,
- 4 for housing and
- 1 for employment services.

The purpose of these services is to assure that clients keep their court appointments, spend as little time as possible in jail, and to assist attorneys in devising and advocating for services in lieu of prosecution or incarceration. The 138 OPD clients who were referred for substance abuse treatment spent a total of 4,775 days, an average of 34.6 days, in jail before going for treatment. Estimating the cost/day at \$169 in 2019 and marginal cost of \$33/day per person jailed, OJC spent \$806,975 to jail these 138 individuals total and marginal

savings of would have totaled \$157,575 had they been released directly to treatment after booking (19.5%). OPD estimated the total 2019 cost of operating OJC at \$76M.⁴³

Youth: In 2019, children and youth made up 5.3% of people arrested in Orleans Parish, including 1% arrested for violent crimes, with a total of 482 children arrested and 860 unique arrests. The number of children arrested has fallen particularly since the institution of the PAY ordinance. In 2019, 65.9% of juvenile “violations” in the NOPD Field Interview Card database resulted in warnings in lieu of arrest. (Datalytics 2019 Year in Review: Juvenile Justice).

For children and youth who received services from OPD Client Services Division, 42% reported SUD, 39% reported diagnosis with a mental health problems, 61% were living with their parents, 25% reported being on probation and 93% were enrolled in school. 35 received referrals to social services and programs. The average age for these children was 15, 98% were Black children and 82%, male.

Estimated Cost Savings:

Overall, if diversion and restorative justice were consistently implemented and the process is optimized in Orleans Parish, it is reasonable to estimate savings up to 50% annually to the city in costs for the jail and criminal courts, and savings of 25-50% for the DA Office and Public Defender Office once fully implemented. On average, for each person decarcerated and/or diverted early in the pre-trial period, more than \$25,000 in savings is expected in the Orleans Parish criminal legal system (CLS) based on jail costs alone.⁴³

This compares with an average estimated cost of diversion for each of the types of diversion listed in Appendix B. When the cost of the screening process and case management is added, overall, the net costs/savings for each diversion program below per person served is indicated.

Appendix B: Cost-Benefit of Diversion Per Case

Source: [Washington State Public Policy Institute \(https://www.wsipp.wa.gov/BenefitCost\)](https://www.wsipp.wa.gov/BenefitCost)

Adult CLS Diversion/Alternative						
Diversion Program	Description	Program Costs Initial	Program Costs 2018 (+/-10%)	Taxpayer Benefits (CLS)	Total Benefits increase	
					Over # years	To
Police diversion pre-arrest (LEAD)	Diversion by police without criminal charges. Similar to LEAD Pilot in 8th District.	\$6384 (2014)	\$584	\$1,171	15	\$4,114
Drug Offender Sentencing Alternative	Court ordered reduction in incarceration time for felony conviction if agree to treatment. Meta-analysis for offenders convicted of crimes involving substance abuse, including property crimes. 5-12 wks SUD treatment. Signif reduced recidivism. Signif reduced crime/recidivism	\$1319 (2014)	\$1,714	\$7,113	15	\$23,912
Case Management	For individuals with history of drug involvement & being supervised in the community under "swift, certain, fair approach". Signif reduces recidivism, substance abuse & technical violations.	\$3972 (2016)	Net cost: \$401	\$4,590	15	\$15,810
Mental Health Courts	MH assessments, individualized treatment plans, intensive case management & judicial monitoring; vary in length, generally between 6 & 25 months of delivered services	\$2656 (2006)	\$3,266	\$5,260	15	\$18,144

<p>Therapeutic Communities for Co-occurring SUD & Mental Health Disorders</p>	<p>Intensive form of SUD treatment generally provided to people with SUD & CLS involvement. Participants live in a continuous therapeutic environment apart from the general population. Therapeutic communities use a hierarchical social learning model, wherein participants earn increased social and personal responsibility as they progress through stages of treatment. Treatment involves a highly structured therapeutic environment, peer support and peer accountability intended to teach participants prosocial norms and behaviors. Signif reduction in recidivism.</p>	<p>\$5093 (2016)</p>	<p>\$5,364</p>	<p>\$5,003</p>	<p>15</p>	<p>\$17,418</p>
<p>Community-based outpatient or intensive drug treatment</p>	<p>Treatment for CLS involved individuals with substance abuse problems; approaches include individual counseling, cognitive behavioral therapy and other approaches with the goal of reducing substance abuse. Participants generally attend treatment for 2-18 months with weekly two-hour sessions. Signif reduced crime/recidivism.</p>	<p>\$769 (2016)</p>	<p>\$810</p>	<p>\$3,235</p>	<p>15</p>	<p>\$10,864</p>
<p>Cognitive Behavioral Therapy (CBT) (for individuals classified as high or</p>	<p>Treatment is goal-oriented and generally of limited duration. CBT emphasizes individual accountability and teaches participants that cognitive deficits, distortions, and flawed thinking processes cause</p>	<p>\$1395 (2016)</p>	<p>\$1,470</p>	<p>\$2,902</p>	<p>15</p>	<p>\$9,270</p>

<p><i>moderate-risk)</i></p>	<p>criminal behavior. For this broad grouping of studies, a variety of “brand name” programs (e.g., Enhanced Thinking Skills, Moral Reconation Therapy, Reasoning and Rehabilitation, and Thinking 4 a Change) were delivered to adults in either an institutional or community setting for an average of 2.5 months. Studies evaluating CBT delivered specifically as sex offender treatment were excluded from this analysis. Signif reduces crime/recidivism.</p>					
<p>Day Reporting Centers</p>	<p>Non-residential facilities used as a form of intermediate sanction for individuals in the CLS. DRCs have three primary goals: 1) enhancing supervision and surveillance of individuals , 2) providing treatment directly or through collaboration with community treatment programs, and 3) reducing jail and prison crowding. Day reporting centers differ in their implementation, but generally require participants to attend the facility for multiple hours each week for supervision and other programming such as counseling, educational courses, employment training, and referrals for additional services. Signif reduces crime/recidivism and unemployment.</p>	<p>\$4275 (2007)</p>	<p>\$4,197</p>	<p>\$2,984</p>	<p>15</p>	<p>\$8,287</p>

<p>Employment counseling and job training in the community</p>	<p>Teach skills necessary for seeking employment. These include both hard skills (e.g., job preparedness and skills training) and soft skills, (e.g., effective job searches, applications, and resumes). Some programs may specifically address barriers to employment for convicted individuals offenders. Significantly increase GED attainment.</p>	<p>\$1962 (2016)</p>	<p>\$2,069</p>	<p>\$676</p>	<p>16</p>	<p>\$1,320</p>
<p>Inpatient or intensive outpatient drug therapy in the community</p>	<p>A variety of community-based inpatient, and intensive outpatient substance abuse treatment programs delivered to individuals who have substance abuse problems. Treatment types include cognitive behavioral therapy, relapse prevention, or a combination of approaches. Participants generally attend treatment for one to five months, with treatment up to six hours per day.</p>	<p>\$889 (2016)</p>	<p>\$937</p>	<p>\$179</p>	<p>15</p>	<p>-\$1637</p>
<p>DUI Courts</p>	<p>For persons with a DUI offense. Participants enter into a contract with the court and agree to comply with treatment and supervision requirements. Non-compliance may result in the imposition of harsher sentences. DUI courts typically involve a team of stakeholders (e.g., participant, judge, treatment provider, case manager, and supervising officer). Most courts include required</p>	<p>\$7076 (2009)</p>	<p>\$8,246</p>	<p>\$2,676</p>	<p>15</p>	<p>\$4,609</p>

	<p>treatment and DUI education and involve judicial monitoring including random breath or transdermal testing. DUI courts include incentives, rewards, and sanctions as well progressive stages in which continued compliance with DUI court stipulations and requirements leads to less monitoring. DUI courts in these studies were typically 12 to 24 months in length. Signif reduces alcohol-related and total crime/recidivism.</p>					
<i>Violence reduction treatment</i>	<p>Violence reduction treatments use therapeutic methods to help participants manage anger and avoid violence. These programs are intended to improve participants' attitudes, reasoning abilities, communication skills and self-awareness. For the studies in this meta-analysis, participants received between 188 and 330 hours of programming over 3.5 to 7 months.</p>	<i>\$5075 (2016)</i>	<i>\$5346 (+/- 60%)</i>	<i>\$604</i>	<i>15</i>	<i>-\$399</i>
<i>Police (Pre-arrest) diversion for individuals with mental illness Crisis Intervention Team Model</i>	<p>Redirect these individuals from the traditional criminal justice system into mental health treatment programs. This review focuses on pre-arrest diversion programs, which are police-based programs. Police-based diversion programs divert participants to services without applying criminal charges. Programs</p>	<i>\$8347 (2016)</i>	<i>\$5,030</i>	<i>-\$1181</i>	<i>15</i>	<i>-\$13,787</i>

	included in this meta-analysis followed the Crisis Intervention Team model, which involves specialized police training and partnerships between police and mental health providers in the community. Mental health courts and post-arrest diversion programs were reviewed separately from this meta-analysis.					
Juvenile Justice Diversion						
Intensive supervision for court-involved youth (vs. confinement in state institutions)	<p>A model of supervision that emphasizes a higher degree of surveillance than traditional supervision in the community. Intensive supervision often involves case management with caseloads of fewer than 25 youth. The conditions of supervision vary but may include urinalysis testing, increased face-to-face or collateral contacts, and required participation in programming. Programming may include mentoring, tutoring, counseling, job training, or other community-based services. On average, youth have 17 monthly contacts with their juvenile probation counselor. This analysis compares youth placed directly on supervision without a period of confinement to youth confined and then released to probation-as-usual. In the included studies, youth were at moderate or high risk for</p>	\$5284 (2015)	\$25988 (+/- 50%)	\$820	10	\$17,190

	<p>recidivism per a validated risk assessment tool; the evaluations in the analysis excludes youth adjudicated with highly violent felonies. The length of supervision and aftercare ranged from six to eight months. In the studies in our analysis that reported demographic information, 64% of participants were youth of color and 2% were female. Signif reduced technical violations.</p>					
<p><i>Diversion, no services (vs traditional juvenile court processing)</i></p>	<p>An alternative to formal sanctions or processing in the juvenile justice system. The goals of diversion are to alleviate the negative consequences associated with the juvenile justice system (e.g., stigmatizing youth as deviant) and to maintain a youth’s pro-social ties in the community. Diversion programs included in this meta-analysis vary in their structure. Some programs divert youth at the initial stages of the juvenile justice system (e.g., diverted by law enforcement upon arrest), while others divert youth once they reach the juvenile courts (e.g., pre-charge). In place of formal sanctions or processing, youth agree to be counseled, warned, and released back into the community. Once a youth completes a probationary period without further</p>	<p><i>\$0 (2016) compared with \$1510 (+/- 20% 2015)</i></p>	<p><i>\$1,769</i></p>	<p><i>\$10,040</i></p>	<p><i>10</i></p>	<p><i>\$8,433</i></p>

	<p>recidivism, their initial offense is dismissed, sealed, or not processed further into the justice system. This analysis compares diversion programs where diverted youth do not receive any services and do not have any formal contact following their diversion to youth traditionally processed in the juvenile justice system. These diversion programs target youth with no previous criminal history or with nonviolent misdemeanor/felony offenses. In the studies in our analysis that reported demographic information, 60% of the diverted sample were youth of color and 18% were female. Reduction in crime/recidivism approach significance (p=0.065).</p>					
<p>Functional Family Therapy (FFT) for court-involved youth</p>	<p>A structured family-based intervention that uses a multi-step approach to enhance protective factors and reduce risk factors in the family. The five major components of FFT include engagement, motivation, relational assessment, behavior change, and generalization. FFT typically involves 12 to 14 therapist visits over a three-to five-month period. Studies included in the analysis report that youth have moderate or high risk for recidivism per a validated risk</p>	<p>\$3877 (2016)</p>	<p>\$4084 (+/- 20%)</p>	<p>\$3,121</p>	<p>45</p>	<p>\$11,282</p>

	<p>assessment tool. In the studies in our analysis that reported demographic information, 55% of FFT participants were youth of color and 26% were female. Studies in this analysis compare FFT to treatment as usual, which was typically probation with referrals to community-based services. This analysis includes studies where FFT is provided to youth in the community following either arrest or adjudication. Evaluations of FFT where youth receive the program upon their release from confinement and FFT for youth convicted of a sex offense are excluded from this analysis and analyzed separately.</p>					
<p><i>Diversion with services (vs traditional juvenile court processing)</i></p>	<p>An alternative to formal sanctions or processing in the juvenile justice system. The goals of diversion are to alleviate the negative consequences associated with the juvenile justice system (e.g., stigmatizing youth as deviant) and to maintain a youth’s pro-social ties in the community. Diversion programs included in this meta-analysis vary in their structure. Some programs divert youth at the initial stages of the juvenile justice system (e.g., diverted by law enforcement upon arrest), while others divert youth</p>	<p><i>\$312 (2016) compared with \$1510 (2015 +/- 20%)</i></p>	<p><i>\$1,278</i></p>	<p><i>\$1,174</i></p>	<p><i>10</i></p>	<p><i>\$5,546</i></p>

	<p>once they reach the juvenile courts (e.g., pre- or post-adjudication). In place of formal sanctions or processing, youth agree to case management and to participate in community-based services (e.g., mentoring, counseling, job training). The current analysis compares youth who received diversion programs with services to youth traditionally processed in juvenile court. These diversion programs target youth with no previous criminal history or with nonviolent misdemeanor/felony offenses. The length of program enrollment for diverted youth ranges from two to eight months, with most youth receiving anywhere from 30-50 hours of face-to-face time with counselors, mentors, or adult/student volunteers. In the studies in our analysis that reported demographic information, 58% of the diverted samples were youth of color and 23% were female. Signif reduced crime/recidivism.</p>					
<p><i>Diversion with services (vs simple release)</i></p>	<p>An alternative to formal sanctions or processing in the juvenile justice system. The goals of diversion are to alleviate the negative consequences associated with the juvenile justice system (e.g., stigmatizing youth as deviant) and to</p>	<p><i>\$970 (2016) compared with \$0</i></p>	<p><i>\$1022 (+/- 20%)</i></p>	<p><i>\$6</i></p>		

	<p>maintain a youth’s pro-social ties in the community. Diversion programs included in this meta-analysis vary in their structure. Some programs divert youth at the initial stages of the juvenile justice system (e.g., diverted by law enforcement upon arrest), while others divert youth once they reach the juvenile courts (e.g., pre- or post-adjudication). In these programs, youth agree to participate in community-based services such as mentoring, counseling, or job training. In addition, youth are commonly required to complete a specific number of community service hours. This analysis compares youth who receive diversion programs that include services with youth who are warned and released (e.g., no formal processing by the juvenile justice system and no referrals to programming). These diversion programs target youth with no previous criminal history or with nonviolent misdemeanor/felony offenses. Among studies in this analysis, the length of program enrollment ranged from four to eight months. Programs that mandated community service required an average of 45 hours. In the studies in our analysis that</p>				
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	reported demographic information, 60% of participants were youth of color, and 15% were female. No difference in crime/recidivism.					
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[Appendix C: Community-Based Restorative Justice & Diversion-Related Services Currently Available for Orleans Parish](#)

[Appendix D: Model MOU for RJ program](#)