

**Submission Id:** 4223

**Title**

*A pre-arrest diversion program for substance use: evaluating predictors of success and impact on clinical outcomes*

**Priority 1 (Research Category)**

Behavioral, psychosocial, and mental illness

**Presenters**

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**Abstract**

Context: Those with untreated substance use disorder (SUD) are often involved with the criminal justice system during the course of addiction and continue to experience negative outcomes following arrest and incarceration. Law enforcement-led pre-arrest diversion programs aimed to redirect those who commit drug use-related offenses to treatment may improve addiction treatment engagement and associated clinical outcomes.

Objective: To identify predictors of treatment engagement and evaluate the impact of a city-wide pre-arrest diversion program on participants' clinical characteristics.

Study Design and Analysis: Prospective evaluation of a community-based pre-arrest diversion program (one-way ANOVA for continuous, chi-square test for categorical outcome variables). Baseline characteristics differing between those who completed ("completers," n=100) and those who did not complete the program ("non-completers," n=60) were used in a logistic regression model to estimate adjusted odds ratio for predictors of program retention.

Setting: A medium-sized Midwestern city.

Population: Adults who committed an eligible, drug use-related crime.

Intervention: A 6-month pre-arrest diversion-to-treatment program.

Outcome Measures: Depression, anxiety, and addiction symptom severity scores, and demographic and addiction treatment-related characteristics collected upon initial clinical assessment (baseline) and at program completion for completers.

Results: Baseline predictors of program completion included: being in treatment (p=0.028), having a recovery support network (p=0.041), having a higher level of awareness of relapse triggers (p=0.023), having relapse prevention coping skills (p=0.001), and having relapse protective factors (p=0.008). The

logistic regression model showed those with better coping skills and in treatment were 3 times more likely to finish the program than their counterparts ( $p < 0.001$ ). Completers were also more likely to be treated with medications for their opioid use disorder and showed improvements in their depression, anxiety, and Brief Addiction Monitor scores ( $p < 0.001$ ) after the program compared to baseline.

Conclusions: A law enforcement-led pre-arrest diversion program may help engage those who commit drug use-related minor crimes in addiction treatment and improve clinical outcomes, particularly in those at lower relapse risk. Future iterations of the program may consider a more intensive support for those at higher relapse risk.