

**BEHAVIORAL HEALTH DIVERSIONARY INITIATIVE  
2022 END OF YEAR REPORT**

**I. INTRODUCTION**

The District Attorney’s Behavioral Health Diversionary Initiative has been receiving applications for approximately 19 months. Prior to implementation of the program, the DA’s Office reviewed policies and procedures for mental health treatment courts throughout the Commonwealth of Pennsylvania. We utilized that information to create a diversionary initiative that utilized traditional sentencing options and treatment options available in the community and private sector.

The objective of the Behavioral Health Diversionary Initiative is to identify individuals with serious mental illnesses who are involved with the criminal justice system and redirect them from traditional criminal justice pathways to mental health treatment systems. By connecting these individuals to community-based treatment services, it is the goal of the program to reduce police contact and recidivism. By successfully completing the program, individuals avoid the consequences that lengthy criminal records can have on them when they reenter society and the workplace.

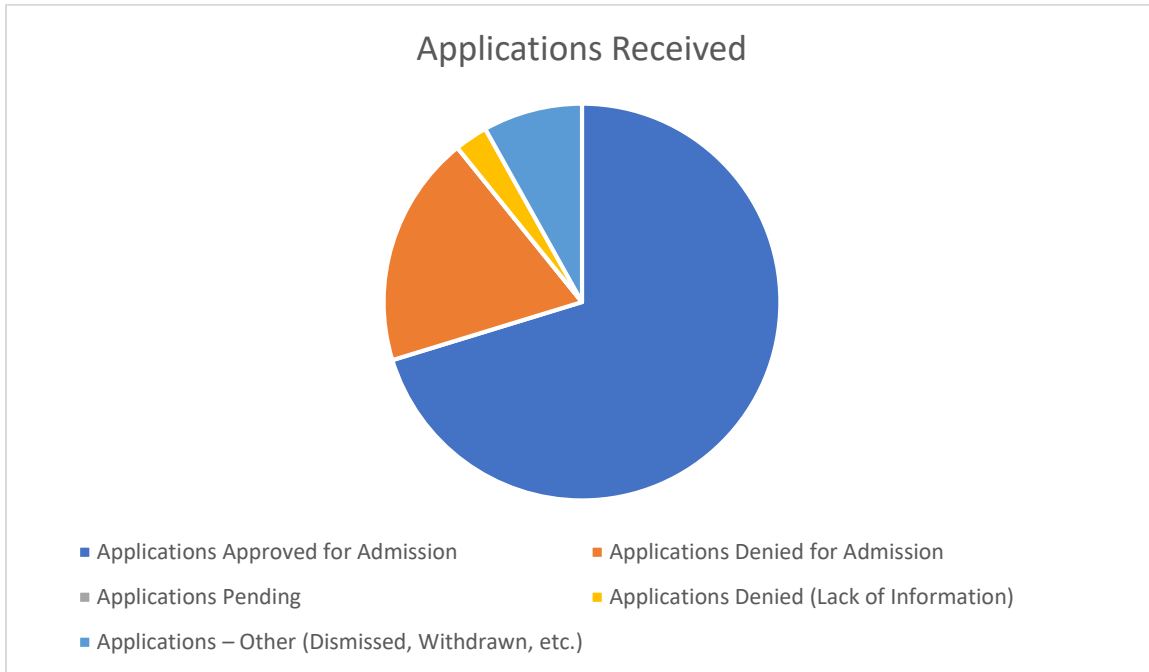
**II. DISCUSSION**

In order to be admitted into the program, the District Attorney’s Office requires applicants to voluntarily seek mental health treatment and be in treatment prior to acceptance. The objective is to simplify the process and have a clear treatment plan that an individual must comply with in order to successfully complete the program. Sentences can include a plea of guilty on reduced charges, ARD with dismissal and expungement of their record and/or continuance of the case for a period of time for the individual to maintain treatment with a dismissal with costs at the end of that period.

### III. BHDI FACT SHEET

#### **Applications Received: 37**

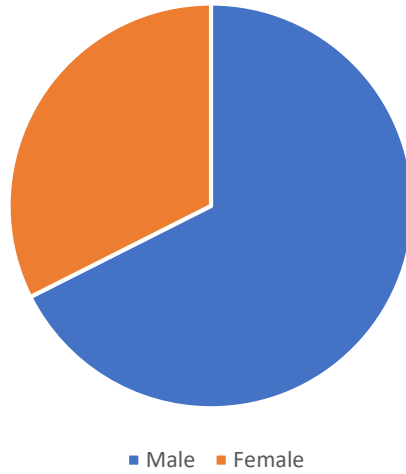
Applications Approved for Admission: 26 (70%)	Applications Denied (Lack of Information): 1 (3%)
Applications Denied for Admission: 7 (19%)	Applications – Other (Dismissed, Withdrawn, etc.): 3 (8%)
Applications Pending: 0 (0%)	



**Applications by Gender: 37**

Male Applied: 25 (68%)	Female Applied: 12 (32%)
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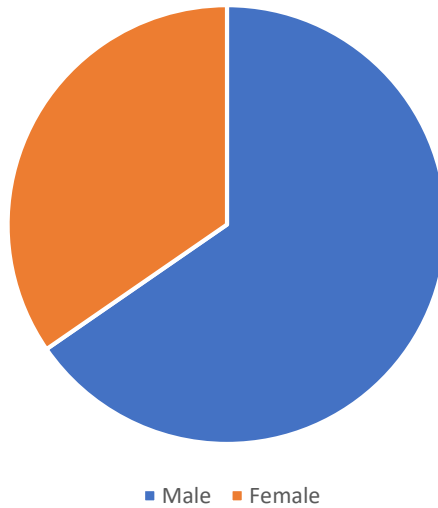
Applications by Gender



**Applications by Gender (Approved): 26**

Male Approved: 17 (65%)	Female Approved: 9 (35%)
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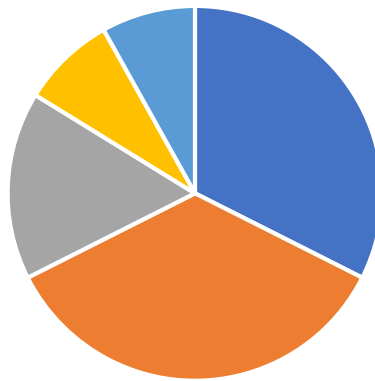
Applications by Gender (Approved)



**Applications by Age: 37**

18-24: 12 (32%)	45-54: 3 (8.5%)
25-34: 13 (35%)	55-64: 3 (8.5%)
35-44: 6 (16%)	

Applications by Age

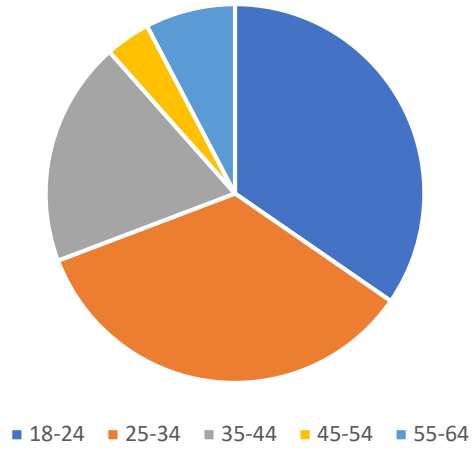


■ 18-24 ■ 25-34 ■ 35-44 ■ 45-54 ■ 55-64

**Applications by Age (Approved): 26**

18-24: 9 (35%)	45-54: 1 (4%)
25-34: 9 (35%)	55-64: 2 (7%)
35-44: 5 (19%)	

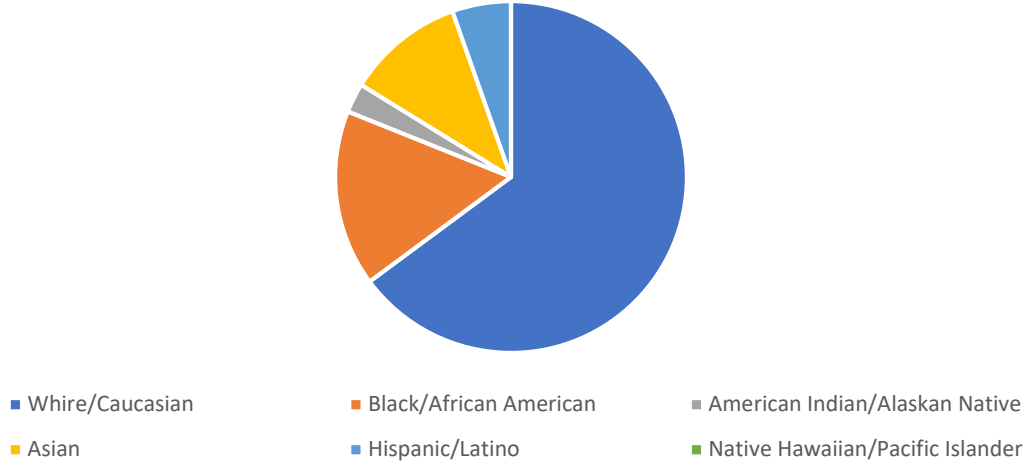
Applications by Age (Approved)



**Applications by Race: 37**

White/Caucasian: 24 (65%)	Asian: 4 (11%)
Black/African American: 6 (16%)	Hispanic/Latino: 2 (5%)
American Indian/Alaskan Native: 1 (3%)	Native Hawaiian/Pacific Islander: 0

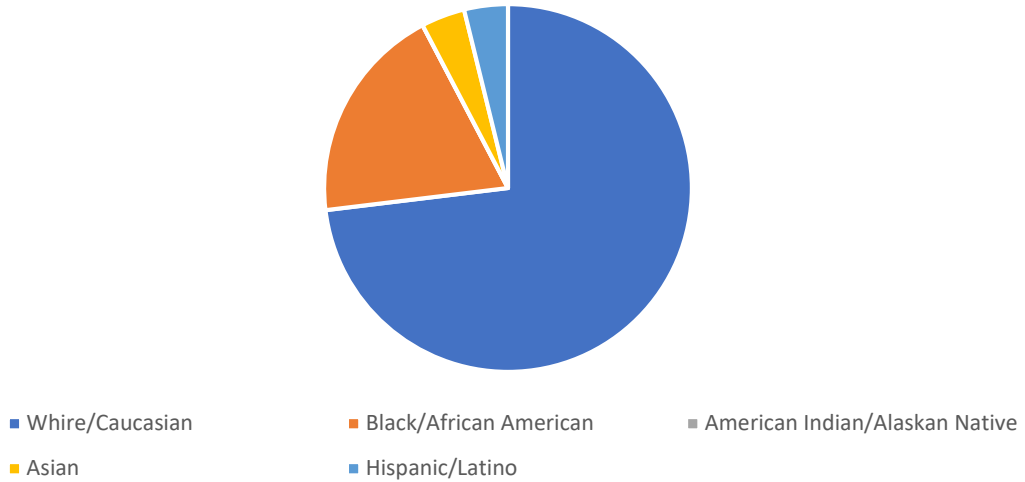
Applications by Race



**Applications by Race (Approved): 26**

White/Caucasian: 19 (73%)	Asian: 1 (4%)
Black/African American: 5 (19%)	Hispanic/Latino: 1 (4%)
American Indian/Alaskan Native: 0	Native Hawaiian/Pacific Islander: 0

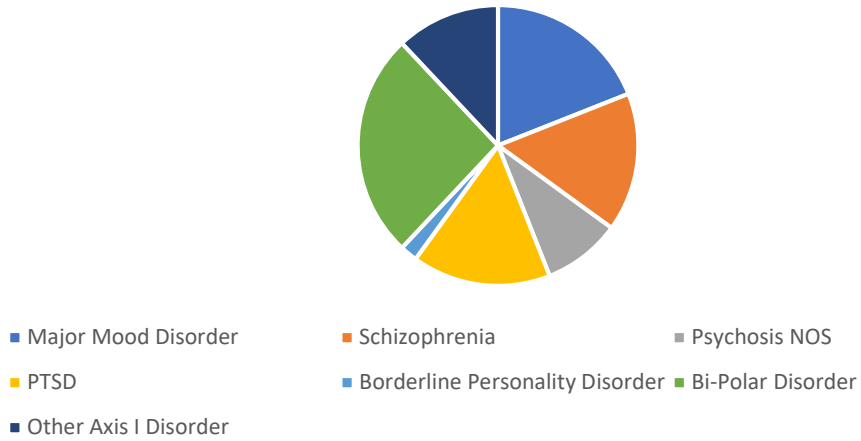
Applications by Race (Approved)



### Applications by Diagnosis

Major Mood Disorder: 19%	Borderline Personality Disorder: 2%
Schizophrenia: 16%	Bi-Polar Disorder: 26%
Psychosis NOS: 9%	Other Axis I Disorder: 12%
PTSD: 16%	

Applications by Diagnosis

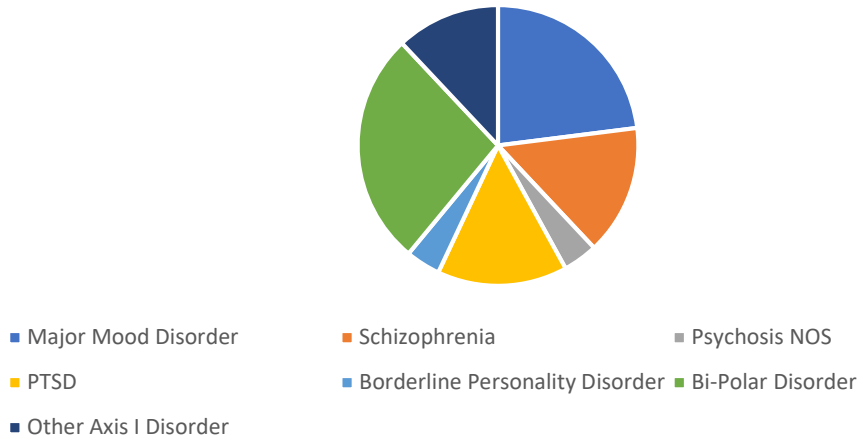




### Applications by Diagnosis (Approved)

Major Mood Disorder: 23%	Borderline Personality Disorder: 4%
Schizophrenia: 15%	Bi-Polar Disorder: 27%
Psychosis NOS: 4%	Other Axis I Disorder: 12%
PTSD: 15%	

Applications by Diagnosis



**Progress of Participants: 26**

Active: 16	Removed: 2
Completed: 8	

