



The Wisconsin Deflection Initiative (WDI) is a proactive community approach to address public health and safety challenges by incorporating deflection pathways to identify and connect at-risk populations to treatment and behavioral health services before a crisis, overdose, or new criminal activity occurs.

Purpose and Goals

Reducing Recidivism and Promoting Public Safety

Address underlying factors contributing to substance use and criminal behavior to reduce recidivism rates and enhance public safety by breaking the cycle of addiction and criminal involvement.

Engaging Communities and Stakeholders

Foster partnerships between law enforcement, healthcare providers, treatment organizations, and community stakeholders to create tailored, community-driven solutions.

Promoting System-Level Change

Drive broader system-level changes in policies, practices, and resource allocation to sustain and expand deflection programs through evidence-based approaches and cross-system collaboration.

Rationale and Expected Outcomes

- **Increased Access to Treatment and Recovery Supports** - Connect individuals with timely and appropriate treatment services while reducing barriers to accessing care
- **Reduced Overdose and Emergency Hospitalization Incidents** - Connect individuals to appropriate treatment and stabilization services to reduce fatal and non-fatal overdoses
- **Improved Individual and Community Health** - Address substance use disorders and mental health challenges comprehensively to enhance physical and mental well-being
- **Reduction in Offending and/or Recidivism** - Through early intervention and targeted diversion, reduce recidivism rates and prevent re-entry into the criminal justice system
- **Cost Savings and Efficient Resource Allocation** - Generate cost savings by diverting individuals to treatment rather than pursuing costly criminal justice processes
- **Strengthened Collaborations and Community Engagement** - Build robust interconnected systems of care through partnerships across multiple sectors

WDI's Strategic Position

The WDI operates within the Sequential Intercept Model (SIM), a nationally recognized framework that identifies six key intervention points where people with mental health and substance use disorders can be diverted from the criminal justice system to treatment and support services.

The WDI strategically focuses on Intercepts 0 and 1 - the earliest and most cost-effective intervention points:

- **Intercept 0:** Community Services (prevention, early intervention)
- **Intercept 1:** Law Enforcement/Emergency Services (police encounters, crisis response)

This positioning prevents deeper criminal justice involvement, reduces trauma associated with arrest and incarceration, and maintains individuals' community connections and stability.

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For more information: cjcc.doj.wi.gov/initiative/wisconsin-deflection-initiative-wdi-0

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Six Deflection Pathways

Deflection pathways provide a standardized framework for engaging individuals and connecting them to appropriate services. Sites may implement single or multiple pathways based on community needs and resources.

1. Self-Referral

Individuals with substance use disorders voluntarily initiate contact with first responder agencies seeking referral to services without fear of arrest.

2. Officer Intervention

Law enforcement provides referrals during routine activities for individuals committing low-level nonviolent offenses where charges could be filed, often holding charges in abeyance.

3. First Responder and Officer Referral

Preventative approach during routine first responder activities, engaging individuals and providing referrals without filing charges or making arrests.

4. Active Outreach

First responders intentionally seek out individuals with substance use disorders to refer them to services, typically conducted by behavioral health professionals and certified peers.

5. Naloxone Plus

Targeted outreach to individuals who have recently experienced opioid overdoses, conducted within 24-72 hours by first responders and behavioral health professionals.

6. Community Response

Teams of behavioral health professionals, crisis workers, and certified peer specialists respond to calls for service to de-escalate crises and provide referrals.

Two Program Types

The WDI employs two distinct but complementary program types designed to meet individuals where they are in their recovery journey, representing a continuum of care from initial engagement to sustained support.

Targeted Outreach Programs

Focus: Initial engagement and brief interventions

Approach: Building trust, providing immediate support, and creating pathways to more intensive services. Maintains the most accessible eligibility criteria within the WDI framework.

Components: Outreach visits (5 minutes to 2 hours), brief interventions using motivational interviewing, resource connection, risk reduction, and safety planning.

Philosophy: Meet people where they are with no requirement for readiness to change or commitment to recovery.

Participant Recovery and Engagement Program (PREP)

Focus: Ongoing support and case management

Approach: Sustained engagement, collaborative planning, and comprehensive support for individuals actively participating in recovery-oriented activities.

Components: Intake and assessment, service engagement (outpatient, residential, mental health, recovery support), case management through PREP contacts, and gradual transition planning.

Duration: Typically 6 months with flexible timeframes based on individual needs and progress toward self-defined goals.

Wisconsin Department of Justice • Bureau of Justice Programs
Document Version: Revised 09.08.2025 • For implementation support and resources: cjcc.doj.wi.gov

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