



Office of Communications

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Who We Are

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) is the state agency that focuses solely on policies, programs, and services for people with mental illness, substance use disorders, and developmental disabilities.

Created by the Governor and the General Assembly in 2009, DBHDD began operations on July 1st, 2009. We are responsible for most of the activities that were undertaken by the Division of Mental Health, Developmental Disabilities, and Addictive Diseases, which was part of the former Department of Human Resources.

We have nearly 9,000 employees.

Our work is structured in three divisions by disability area: Mental Health, Developmental Disabilities, and Addictive Diseases.

DBHDD operates 7 regional state hospitals and provides and oversees community-based services across the state.

What We Do

DBHDD is responsible for policies, programs, and services for people with:

- Severe and persistent mental illness,
- Developmental and intellectual disabilities,
- Substance use disorders,
- Or a combination of any of these.

The people we serve are most often uninsured or on Medicaid. Very often they have few resources and few options.

In FY 2010 we served more than 164,000 people through our hospital and community-based services, including 123,000 with mental illness, 26,000 with substance use disorders, and 19,000 with developmental disabilities. Many of the services funded by the state are provided by community providers such as local Community Service Boards.

In FY 2010 we admitted 9,561 people to our state hospitals and on any given day served approximately 1,995 consumers there.

Another distinct population we serve is those who have been found Not Guilty By Reason of Insanity (NGRI) or Incompetent to Stand Trial (IST) by the criminal justice system. These are referred to as “forensic consumers” because they’ve been placed in our care by the court system. Our role is to treat their underlying condition and, in the case of IST consumers, to restore their competency so they can stand trial. The courts decide when and if someone is eligible to be released from our care.

Access

Constituents can access our services through the Georgia Crisis and Access Line (GCAL), which is 1-800-715-4225. GCAL is a statewide, single point of access for all of our services that’s available 24-hours a day, 7 days a week. Callers are evaluated to determine if they need immediate counseling. If so, they speak with a clinician immediately. If not, they’re referred to local community-based services and an appointment is scheduled for them if appropriate.

People can also access our services through their local Community Service Boards.

Community-based Services

In general healthcare, the hospital ideally isn’t your first stop when you have an illness and you don’t want to stay there any longer than necessary. Just as the emergency room is not the best place for primary care, the same is true for the populations we serve.

The goal of community-based services is to serve people as close to home as possible in the least restrictive setting. Doing so allows them to draw on natural supports, such as family, neighbors, churches, schools, and community activities. It gives them a better chance to maintain the kind of quality of life that all of us want with self-determination and independence.

DBHDD provides and funds a variety of community-based services, including:

- Treatment through providers such as with Community Service Boards;
- Mobile Crisis services for adults as well as children and adolescents;
- Services funded through Medicaid waivers for people with developmental & intellectual disabilities;
- Assertive Community Treatment (ACT) teams that can visit those with persistent mental illness on a daily basis if needed;
- Group homes;
- Crisis Stabilization Programs;
- And many others for all three of the major populations we serve.

Hospitals

DBHDD operates seven regional and state hospitals located in Rome, Atlanta, Milledgeville, Augusta, Columbus, Thomasville, and Savannah. The hospitals offer different services based on the populations they serve and the capacity of community providers. These hospitals provide a spectrum of care from 23-hour observation through residential services.

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