

# The Indiana Commission to Combat Drug Abuse



*Behavioral Health Division*

## **Comprehensive Community Plan**

County: LaGrange County

LCC Name: CDFLC (Council for a Drug-Free LaGrange County)

LCC Contact: Angie Zelt

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City: LaGrange, IN 46761

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County Commissioners: Kevin Myers, Terry Martin, Peter Cook

Address: 114 W. Michigan

City: LaGrange

Zip Code: 46761

## **Vision Statement**

CDFLC envisions a community where adults and youth choose to live a life free of alcohol and drug misuse.

## **Mission Statement**

The mission of the Council for a Drug-Free LaGrange County (CDFLC) is to raise awareness of alcohol, tobacco, and other drug issues and to support the most effective combination of individuals and other resources to positively impact the problems of drug and alcohol in our community.

<b>Membership List</b>					
<b>#</b>	<b>Name</b>	<b>Organization</b>	<b>Race</b>	<b>Gender</b>	<b>Category</b>
1	Robinn Mitchelle	Bowen Center	C	F	Treatment
2	Terry Martin	County Commissioner	C	M	Law Enforcement
3	Yvonne Riege	ARC, Inc.	C	F	Treatment
4	Shay Ousley	Reason 4 Hope	C	F	Prevention
5	Julie Wahll	Reason 4 Hope	C	F	Prevention
6	Amanda Montague	Elijah Haven	C	F	Treatment
7	Lisa Bowen-Slaven	Drug Court	C	F	Law Enforcement
8	Jackie Conwell	Westview PD	C	F	Law Enforcement
9	Heidi Moon	Shipshewana PD		F	Law Enforcement
10	Randy Merrifield	JDAI	C	M	Government
11	Stan Strater Jr.	Topeka Police		M	Law Enforcement
12	Tim Cleveland	State Excise	C	M	Law Enforcement
13	Nicole Fairchild	McMillen Health	C	F	Education/Prevention
14	Hannah Boughman	Northeastern Center	C	F	Treatment
15	Juan Arroyo	SC Sheriff's Office		M	Law Enforcement
16	Tracy Harker	SC Sheriff's Office	C	M	Law Enforcement
17	Kimberly Hayes	Reason 4 Hope	C	F	Prevention
18	Alicia Johnson	Bowen Center	C	F	Treatment
19	Jackie Christman	Impact Institute	C	F	Intervention/Education
20	Damon Witherspoon	Prairie Heights High School	C	M	Education
21	Shannon Gleason	McMillen Health	C	F	Education/Prevention
22	Christina Blaskie	Parkview LaGrange Hospital	C	F	Intervention/Treatment

## **LCC Meeting Schedule:**

**Please provide the months the LCC meets throughout the year:**

January, February, March, April, May, June, August, September, October, and November.

## Community Needs Assessment: Results

*The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.*

### Community Profile

<b>County Name</b> LaGrange County
<b>County Population</b> 40,524
<b>Schools in the community</b> West Yoder School Amish School Elm View Eden Ridge Timber Ridge Bird Song Echoes Song Bird Lane River School Schwartz School Blue Ridge School Clear Creek School Bright Horizons Elementary School Hebron Christian Day School Lakeland Jr/Sr High School Lakeland Intermediate School Lakeland Primary School Meadowview Parkside Elementary School Prairie Heights High School Prairie Heights Middle School Prairie Heights Elementary School Shipshewana-Scott Topeka Elementary School Westview Jr/Sr High School Westview Elementary School Wolcott Mills Elementary School
<b>Medical care providers in the community (hospitals, health care centers, medical centers/clinics)</b> Community Health Clinic LaGrange County Health Department Northeast Internal Medicine Parkview LaGrange Hospital Parkview Physicians Group Redi-Call Shipshewana Family Healthcare

**Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)**

Addictions Recovery Centers of Indiana, Inc.  
Bowen Center  
Fairview Counseling  
Nicolet Counseling, LLC  
Northeastern Center  
Parkview Health Systems

**Service agencies/organizations**

Addictions Recovery Centers of Indiana  
American Red Cross  
Arc of LaGrange County  
Bowen Center  
Chamber  
Clothes & Food Basket  
Compassion Pregnancy Centers of Northeast Indiana  
Department of Child Services  
Department of Health  
Elijah Haven Crisis Intervention Center, Inc.  
Fairview Counseling  
Habitat for Humanity  
Impact Institute  
JDAI  
LaGrange Community Youth Centers  
LaGrange County 4-H Fair Association  
LaGrange County Community Youth Centers  
LaGrange County WIC  
LaGrange County Division of Family Resources  
Life Care Center of LaGrange  
LaGrange County Family & Children  
LaGrange County Council on Aging  
LaGrange County Drug Court  
LaGrange County Health Coalition  
LaGrange County Prosecutor's Office  
LaGrange County Sheriff's Department  
LaGrange Rotary Club  
Nicolet Counseling  
Northeastern Center  
Parkview Health  
Purdue Extension  
Reason 4 Hope  
State Excise  
Shipshewana Police Department  
United Way of LaGrange County

**Local media outlets that reach the community**

LaGrange Publishing  
LaGrange Standard and News  
Ink Free News  
WANE-TV  
WPTA

WISE WTHD
<b>What are the substances that are most problematic in your community?</b> Alcohol Flavored Alcoholic Drinks Fentanyl (rainbow fentanyl) Methamphetamine Vaping THC Vapes Marijuana
<b>List all substance use/misuse services/activities/programs presently taking place in the community.</b> Bowen Center Second Chance Group Northeastern Center ARC, Inc. Reason 4 Hope Drug Court Celebrate Recovery JDAI

### Community Risk and Protective Factors

*Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.*

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.<sup>1</sup>

Risk Factors	Resources/Assets	Limitations/Gaps
1. Accessibility to marijuana , THC vapes, and other drugs.	1. Drug Court 2. Addictions counseling available. 3. Local prevention and intervention programs.	1. Vapes containing THC are accessible to all ages. 2. Close proximity to Michigan where marijuana is legal.

<sup>1</sup>Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

	<ol style="list-style-type: none"> <li>4. Schools addressing substance abuse topics with their students.</li> <li>5. MAT is available.</li> </ol>	<ol style="list-style-type: none"> <li>3. Generational drug addiction.</li> <li>4. Lack of knowledge regarding the dangers of alcohol abuse.</li> <li>5. Difficult to get information to parents about new drug trends.</li> </ol>
2. Youth alcohol consumption is acceptable among many families.	<ol style="list-style-type: none"> <li>1. TeenCourt</li> <li>2. Agencies offering services to the entire family.</li> <li>3. Alcohol prevention education available to schools.</li> </ol>	<ol style="list-style-type: none"> <li>1. Generational alcohol addiction.</li> <li>2. Alcohol consumption among the Amish community continues to be an issue.</li> <li>3. People unwilling or incapable of accessing services.</li> <li>4. Families at times use alcohol as a rite of passage.</li> <li>5. Lack of family activities within the community.</li> </ol>
3. Substance use disorders due to mental health issues continue to be a problem for youth and adults.	<ol style="list-style-type: none"> <li>1. Many mental health treatment agencies are available.</li> <li>2. Agencies offering mental health counseling in the schools.</li> <li>3. Faith-based agencies offering family support.</li> <li>4. QPR training being offered locally.</li> <li>5. Crisis Intervention Training being offered locally.</li> </ol>	<ol style="list-style-type: none"> <li>1. Lack of transportation to services.</li> <li>2. Lack of education regarding mental health illness and substance abuse disorders.</li> <li>3. Mental health stigma keeps people from seeking services.</li> <li>4. Lack of knowledge regarding mental health services.</li> </ol>
<b>Protective Factors</b>	<b>Resources/Assets</b>	<b>Limitations/Gaps</b>
<ol style="list-style-type: none"> <li>1. Access to mental health services.</li> </ol>	<ol style="list-style-type: none"> <li>1. In Person and telehealth counseling available.</li> <li>2. Faith-based programs and churches.</li> <li>3. Local agencies offer support for the entire family.</li> </ol>	<ol style="list-style-type: none"> <li>1. Lack of public transportation to access services.</li> <li>2. People are not aware of mental health services available.</li> <li>3. Parents not aware of signs of mental health issues in their youth.</li> </ol>
<ol style="list-style-type: none"> <li>2. Meaningful youth engagement opportunities.</li> </ol>	<ol style="list-style-type: none"> <li>1. Strong support systems within the schools.</li> <li>2. Youth serving agencies and faith based</li> </ol>	<ol style="list-style-type: none"> <li>1. Lack of family activities available within our community.</li> <li>2. Families often work multiple jobs to make</li> </ol>

	<p>organizations offer youth programming.</p> <p>3. Mentoring available through youth serving agencies.</p>	<p>ends meet, leaving little time for engaging with their youth.</p> <p>3. Youth often don't have transportation to youth events due to parents either not being engaged or working. transportation if the parent is working.</p>
<p>3. Available intervention programs.</p>	<p>1. Local agencies work together to help ensure the needs of their clients are met.</p> <p>2. Multiple intervention programs available.</p> <p>3. In person and virtual programs are offered.</p>	<p>1. Individuals may not be aware of programs offered.</p> <p>2. Lack of public transportation available.</p> <p>3. Individuals without insurance may not be aware of financial assistance available.</p>

### **Making A Community Action Plan**

*Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.*

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

## Step 1: Create + Categorize Problem Statements

*Create problem statements as they relate to each of the identified risk factors.*

Risk Factors	Problem Statement(s)
1. Underage drinking and excessive alcohol use among adults..	<ol style="list-style-type: none"> <li>1. Underage drinking continues to be a problem among youth in LaGrange County.</li> <li>2. Adults in LaGrange County have alcohol related offenses.</li> </ol>
2. Adult and youth substance use.	<ol style="list-style-type: none"> <li>1. Substance use disorder continues to be a problem among adults in LaGrange County.</li> <li>2. Residents of LaGrange County have easy access to marijuana, THC vapes, and other drugs.</li> <li>3. Adults in LaGrange County continue to have drug related offenses.</li> <li>4. Vaping among youth has increased.</li> <li>5. Marijuana use remains an issue among youth and adults.</li> <li>3. Meth use has increased.</li> </ol>
4. Mental health disorders	<ol style="list-style-type: none"> <li>1. Youth and adult suicides continue to be a concern in LaGrange County.</li> <li>2. Agencies providing mental health counseling see an increased number of youth presenting with anxiety and depression.</li> <li>3. Substance use disorder is linked to mental health disorders.</li> <li>4. More education is needed regarding the connection between mental health issues and substance use disorders.</li> <li>5. Anxiety and depression have increased among youth.</li> </ol>



## Step 2: Evidence-Informed Problem Statements

*Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).*

Problem Statements	Data That Establishes Problem	Data Source
<p>1. Adults and youth in LaGrange County have excessive alcohol use.</p>	<p>In 2019, 6% of Indiana adults reported having an alcohol use disorder.</p> <p>Of 322 clients, 32% suffer from alcohol use disorder.</p> <p>LaGrange County community and health providers ranked alcohol use their fifth highest health concern.</p> <p>In 2020, 11.1% of driving deaths were alcohol related.</p> <p>In 2020, 18.1% of adults report binge/heavy drinking.</p>	<p>IYI 2022 Kids Count Data Book</p> <p>Bowen Center LaGrange County</p> <p>Parkview Hospital LaGrange Community Assessment</p> <p>Parkview Hospital LaGrange Community Assessment</p> <p>Parkview Hospital LaGrange Community Assessment.</p>
<p>2. Substance use disorder continues to be a problem among adults and youth in LaGrange County.</p>	<p>Substance use disorder was the second most common reason children were placed in foster care.</p> <p>In 2019, 60% of children were removed from their homes due to parental opioid use.</p> <p>Of 332 clients in 2022, the following suffer from substance use disorders.</p> <ul style="list-style-type: none"> <li>● 8% opioid</li> <li>● 9% cannabinoid</li> <li>● 23% other simulant</li> </ul> <p>Of the 332 clients in 2022, the following details age range.</p> <ul style="list-style-type: none"> <li>● 4% under the age of 18</li> <li>● 95% 18-64 years old</li> <li>● 1% over the age of 65</li> </ul> <p>Mental health and substance use disorders have been determined</p>	<p>IYI 2022 Kids Count Data Book</p> <p>IYI 2022 Kids Count Data Book</p> <p>Bowen Center LaGrange County</p> <p>Bowen Center LaGrange County</p> <p>Parkview Hospital LaGrange Community Assessment</p>

	<p>as a priority area in LaGrange County.</p> <p>In 2020, there were 93 non-fatal emergency department overdose patients.</p>	<p>Parkview Hospital LaGrange Community Assessment</p>
<p>3. Substance use disorder is linked to mental health disorders in youth and adults.</p>	<p>In 2019, one in five adults struggled with mental health.</p> <p>Mental health and substance use disorders have been determined as a priority area in LaGrange County.</p> <p>LaGrange County community and health providers ranked substance use disorders as their number one health concern and mental health as their fourth highest concern.</p>	<p>IYI 2022 Kids Count Data Book</p> <p>Parkview Hospital LaGrange Community Assessment</p> <p>Parkview Hospital LaGrange Community Assessment</p>

### Step 3: Brainstorm

*Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.*

<b>Problem Statements</b>	<b>What can be done (action)?</b>
<p>1. Adults and youth in LaGrange County have excessive alcohol use.</p>	<ol style="list-style-type: none"> <li>1. Support youth alcohol prevention programs.</li> <li>2. Expand programming to include the Amish community for alcohol prevention and intervention information.</li> <li>3. Work to expand coalition members to include additional alcohol treatment programs such as Celebrate Recovery.</li> <li>4. Work to expand community awareness regarding the dangers of alcohol misuse.</li> </ol>
<p>2. Substance use disorder continues to be a problem among adults and youth in LaGrange County.</p>	<ol style="list-style-type: none"> <li>1. Work with area schools for early drug prevention programs.</li> <li>2. Work with area employers to share information about substance use disorders and available resources.</li> <li>3. Increase coalition members that provide substance use disorder programming.</li> <li>4. Increase community awareness regarding the dangers of substance use disorders.</li> <li>5. Increase social media presence with information regarding substance use disorders.</li> </ol>

<p>3. Substance use disorder is linked to mental health disorders in youth and adults.</p>	<ol style="list-style-type: none"> <li>1. Educate the community on early warning signs of mental issues in youth and adults.</li> <li>2. Promote mental health resources on social media.</li> <li>3. Expand QPR training opportunities.</li> <li>4. Support area programs that provide mental health counseling.</li> <li>5. Work with area schools to provide resources for mental health counseling.</li> </ol>
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**Step 4: Develop SMART Goal Statements**

*For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.*

<p><b>Problem Statement #1</b></p>	
<p>Goal 1 Decrease adult alcohol related offenses by 3% by April 2025.</p>	
<p>Goal 2 Increase youth reached by alcohol prevention programs by 3% by April 2025.</p>	
<p><b>Problem Statement #2</b></p>	
<p>Goal 1 Increase the number of youth receiving substance use disorder education by 3% by April 2025.</p>	
<p>Goal 2 Increase the number of adults receiving substance use disorder treatment by 3% by April 2025.</p>	
<p><b>Problem Statement #3</b></p>	
<p>Goal 1 Increase the number of coalition members that provide mental health counseling and/or substance use disorders by 4 by April 2025..</p>	
<p>Goal 2 Increase the number of adults with substance use disorder receiving mental health counseling by 3% April 2025.</p>	

## Step 5: Plans to Achieve Goals

*For each goal, list the steps required to achieve each*

<b>Problem Statement #1</b>	<b>Steps</b>
<p>Goal 1 Support youth alcohol prevention programs.</p>	<ol style="list-style-type: none"> <li>1. Increase coalition participation from agencies that provide youth programming.</li> <li>2. Promote Lifeline Law.</li> <li>3. Support area programs that provide youth programming outside of schools.</li> <li>4. Increase education to the Amish community.</li> <li>5. Support law enforcement and judicial initiatives that address underage drinking.</li> </ol>
<p>Goal 2 Work to expand coalition members to include additional alcohol treatment programs.</p>	<ol style="list-style-type: none"> <li>1. Increase coalition to include additional programs offering alcohol recovery services.</li> <li>2. Support programs that provide alcohol education.</li> <li>3. Invite churches to join the coalition.</li> <li>4. Support law enforcement programs that work to prevent underage drinking.</li> </ol>
<b>Problem Statement #2</b>	<b>Steps</b>
<p>Goal 1 Work with area schools for early drug prevention programs.</p>	<ol style="list-style-type: none"> <li>1. Support agencies that provide youth prevention programs, increasing our focus on the Amish community.</li> <li>2. Work to educate parents on the dangers and warning signs of drug use.</li> </ol>
<p>Goal 2 Increase coalition members that provide substance use disorder programming.</p>	<ol style="list-style-type: none"> <li>1. Support law enforcement and judicial initiatives that address substance abuse among youth and adults.</li> <li>2. Increase awareness of available programs and resources in the community including those for treatment and recovery for adults.</li> </ol>
<b>Problem Statement #3</b>	<b>Steps</b>
<p>Goal 1 Educate the community on early warning signs of mental issues in youth and adults.</p>	<ol style="list-style-type: none"> <li>1. Increase partnerships with local schools.</li> <li>2. Increase partnerships with local churches.</li> <li>3. Use social media platforms to promote community awareness.</li> </ol>
<p>Goal 2 Support area programs that provide mental health counseling.</p>	<ol style="list-style-type: none"> <li>1. Increase partnerships with local hospitals and physicians.</li> <li>2. Promote and support counseling services for youth and adults including services to the financially disadvantaged.</li> <li>3. Increase awareness of available programs and resources in the community.</li> </ol>

## Fund Document

*The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).*

<b>Funding Profile</b>		
<b>1</b>	<b>Amount deposited into the County DFC Fund from fees collected last year:</b>	<b>\$17,071.02</b>
<b>2</b>	<b>Amount of unused funds from last year that will roll over into this year:</b>	<b>\$6,200.26</b>
<b>3</b>	<b>Total funds available for programs and administrative costs for this year (Line 1 + Line 2):</b>	<b>\$23,271.28</b>
<b>4</b>	<b>Amount of funds granted last year:</b>	<b>\$21,590.53</b>
<b>Additional Funding Sources (if no money is received, please enter \$0.00)</b>		
<b>A</b>	<b>Substance Abuse and Mental Health Services Administration (SAMHSA):</b>	<b>\$0.00</b>
<b>B</b>	<b>Centers for Disease Control and Prevention (CDC):</b>	<b>\$0.00</b>
<b>C</b>	<b>Bureau of Justice Administration (BJA):</b>	<b>\$0.00</b>
<b>D</b>	<b>Office of National Drug Control Policy (ONDCP):</b>	<b>\$0.00</b>
<b>E</b>	<b>Indiana State Department of Health (ISDH):</b>	<b>\$0.00</b>

<b>F</b>	<b>Indiana Department of Education (DOE):</b>	<b>\$0.00</b>
<b>G</b>	<b>Indiana Division of Mental Health and Addiction (DMHA):</b>	<b>\$0.00</b>
<b>H</b>	<b>Indiana Family and Social Services Administration (FSSA):</b>	<b>\$0.00</b>
<b>I</b>	<b>Local entities:</b>	<b>\$0.00</b>
<b>J</b>	<b>Other:</b>	<b>\$0.00</b>

**Categorical Funding Allocations**

<b>Prevention/Education:</b>	<b>Intervention/Treatment:</b>	<b>Justice Services:</b>
<b>\$5,817.82</b>	<b>\$5,817.82</b>	<b>\$5,817.82</b>

**Funding allotted to Administrative costs:**

<i>Itemized list of what is being funded</i>	<i>Amount (\$100.00)</i>
<b>Coordinator compensation</b>	<b>\$4,000.00</b>
<b>Office supplies</b>	<b>\$1,817.82</b>

**Funding Allocations by Goal per Problem Statement:**

<b>Problem Statement #1</b>	<b>Problem Statement #2</b>	<b>Problem Statement #3</b>
<b>Goal 1: \$2,908.91</b>	<b>Goal 1: \$2,908.91</b>	<b>Goal 1: \$2,908.91</b>
<b>Goal 2: \$2,908.91</b>	<b>Goal 2: \$2,908.91</b>	<b>Goal 2: \$2,908.91</b>

