

# **The Indiana Commission to Combat Drug Abuse**



*Behavioral Health Division*

## **Comprehensive Community Plan**

County: Adams

LCC Name: Drug Free Adams County

LCC Contact: Ian Gilbert

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City: Decatur

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County Commissioners: Steve Bailey, Stan Stoppenhagen, Doug Baumann

Address: 313 W. Jefferson St. Room 233

City: Decatur

Zip Code: Indiana

### **Vision Statement**

What is your Local Coordinating Council's vision statement?

Drug Free Adams County's vision statement is for Adams County residents to live in a healthy community, free from the abuse of alcohol and other drugs.

### **Mission Statement**

What is your Local Coordinating Council's mission statement?

The mission statement for Drug Free Adams County is to promote responsible lifestyle choices that reduce the negative impact of alcohol, tobacco, and other drugs to youth and adults in the Adams County community.

## Membership List

#	Name	Organization	Race	Gender	Category
1	Bob Corral	Bowen Center	Hispanic	Male	Treatment
2	Danielle Reed	DCS	Caucasian	Female	Other
3	Baldemar Silva	AMH BH	Hispanic	Male	Treatment
4	Ian Gilbert	Community Corrections	Caucasian	Male	Judiciary
5	Dan Rickord	Mayor	Caucasian	Male	Government
6	Brad Stoltz	Decatur PD	Caucasian	Male	Law Enforcement
7	Mike Mendoza	Adams County Sheriffs Dept	Caucasian	Male	Law Enforcement
8	Wes Haight	Berne Council	Caucasian	Male	Government
9	Shannon Gleason	McMillen Health	Caucasian	Female	Education
10	Mandy Lengerich	Adams Wells Special Services	Caucasian	Female	Other
11	Stephanie Beaver	Community Corrections	Caucasian	Female	Judiciary
12	Jack Odle	Probation	Caucasian	Male	Judiciary
13	Carly Raymond	Community Corrections	Caucasian	Female	Judiciary
14	Madison Hake	Community Corrections	Caucasian	Female	Judiciary
15	Elizabeth Lenart	Purdue Extension	Caucasian	Female	Education
16	Anita Miller	Work ONE	Caucasian	Female	Other
17	Allison Stucky	AMH BH	Caucasian	Female	Treatment
18	Chelsi Line	AMH BH	Caucasian	Female	Treatment
19	Jenni Broderick	Park Center	Caucasian	Female	Treatment
20	Rob Parker	Crossroads Community	Caucasian	Male	Treatment
21	Jodi Mawhorr	Adams-Wells Crisis Center	Caucasian	Female	Other
22	Stan Stoppenhagen	Adams County Council	Caucasian	Male	Government
23	Brad Weber	Public Defender	Caucasian	Male	Judiciary
24	Zach Dawson	Avenues	Caucasian	Male	Treatment
25	Bob Becker	Citizen	Caucasian	Male	Other
26	Corey Hamm	Decatur PD	Caucasian	Male	Law Enforcement
27	Kyra Winkler	Park Center	Caucasian	Female	Treatment
28	Taylor Oliver	North Adams	Caucasian	Female	Education
29	Sam Conrad	Superior CT	Caucasian	Make	Judiciary
30	Kara Klinker	Adams Cent.	Caucasian	Female	Education

### LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:  
January, February, April, May, June, August, September, October

## II. Community Needs Assessment

*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

County Name

Adams

County Population

36,584

Schools in the community

North Adams Community Schools, Adams Central Community Schools, South Adams Community Schools, St. Paul Lutheran School, St. Joe Catholic School, Three Oaks Christian School, Faith Baptist School, and Amish Schools.

Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.)

Adams Memorial Hospital, Adams Medical Complex, Stat Care, Hope Clinic, Unfailing Love Clinic, Decatur Urgent Care

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

Adams Memorial Hospital, Bowen Center, Park Center, Renovate Counseling, and SOAR Counseling

Service agencies/organizations

Adams County Cares, Adams County Parks and Rec, Adams Wells Crisis Center, Boys and Girls Club of Adams County, Boy Scouts, Healthy Families, SAFE, St. Vincent DePaul, WIC, Decatur Rotary Club, Berne Rotary Club, Optimists Club, Alcoholics Anonymous, Brianna's Hope, Narcotics Anonymous, Menno Misfits, Positive Resource Connection, Township Trustee, Compassionate Ministries,



Brightpoint, Operation Help Food Pantry, Unfailing Love Clinic, Adams County Cancer Coalition, and Crossroads Community
Local media outlets that reach the community  Decatur Daily Democrat, Berne Witness Radio: WZBD
What are the substances that are most problematic in your community?  Alcohol, Methamphetamine, Prescription Drugs, Marijuana, Heroin, Fentanyl, cocaine
List all substance use/misuse services/activities/programs presently taking place in the community  Counseling and/or Skills Education at Adams Behavioral Health, Park Center, and Bowen Center, Education programs at Adams County Community Corrections including MRT and Thinking for Good, K9 program, DETECT Drug Task Force Alcoholics Anonymous, Brianna's Hope, Crossroads Community, Project Connect, Narcotics Anonymous, Menno Misfits, Substance Abuse Education in the Adams County Detention Center SADD, Too Good for Drugs, Student Role Model Program, Drug/alcohol prevention education by McMillen Health, Alive and Well, RISQ in/for all three school corporations, Random drug testing at North Adams Community Schools, Unwanted medication collection boxes at Decatur PD, Geneva PD, and Kaup Pharmacy, Prevention/Education scholarships Treatment scholarships, School Resource Officers at all 3 public schools in the county

## 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>

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

<b>Risk Factors</b>	<b>Resources/Assets</b>	<b>Limitations/Gaps</b>
1. Generational Norms	1. Crossroads Community 2. Middle school and High school DFAC chapters 3. Community behavioral health partners	1. Lack of Prosocial Activities 2. Lack of public transportation 3. Youth engagement
2. Availability of Drugs and Alcohol	1. Crossroads Community 2. Brianna's Hope 3. Community behavioral health partners	1. Lower arrest rates 2. Readily Available 3. The number of social events that endorse drinking.
3. Lack of Local Prosocial Activities	1. Variety of Outdoor Recreational Facilities 2. Mayor's Youth Council 3. Newly formed HS/MS DFAC school chapters	1. Youth focused groups 2. Mentorship 3. Transportation
<b>Protective Factors</b>	<b>Resources/Assets</b>	<b>Limitations/Gaps</b>
1. Access to Behavioral Healthcare	1. Park Center and Adams Behavioral Health 2. MAT services 3. Project Connect	1. Lack of specialized therapists 2. Healthcare coverage disparity 3. Awareness
2. Resilience Court	1. Treatment Court for co-occurring disorders 2. Multidisciplinary team approach 3. Specialized case management	1. Low program numbers 2. Does not include low risk clients 3. Stigma of co-occurring diagnosis
3. Community partners serving youth.	1. Boys and Girls Club 2. MS/HS DFAC groups in all 3 school systems 3. School based mental health services	1. Stigmatizing/minimalizing 2. Work/school attendance policy 3. Parental follow through

### III. 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. Generational Norms	<ul style="list-style-type: none"><li>1. Local youth have low engagement in youth focused activities held in the community</li><li>2. Limited public transportation makes it difficult for citizens to attend self help meetings.</li><li>3. Adams County lacks prosocial activities that are alcohol free and family oriented.</li></ul>
2. Availability of drugs and alcohol	<ul style="list-style-type: none"><li>1. Drug and alcohol related arrests remain well below rates prior to the pandemic.</li><li>2. The community lacks alcohol free social events.</li><li>3. Alcohol and drugs are easily assessable to both adults and youth in the community.</li></ul>
3. Lack of affordable prosocial activities	<ul style="list-style-type: none"><li>1. Besides youth sporting events, there very few affordable youth focused groups and activities within the community.</li><li>2. There are a limited number of prosocial/mentorship programs in the community for both youth and young adults.</li><li>3. Public transportation is limited to daytime hours.</li></ul>



## 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
1. The use and abuse of alcohol, nicotine, and drugs by youth remains high as a result of low engagement in youth focused programming in the community.	Nearly 27% of students in grades 7-12 who drank alcohol in 2024 were given the drink by a parent or guardian in Indiana.	Indiana Prevention Resource Center
	Marijuana use by 6 <sup>th</sup> graders has increased by .4% in Indiana over the past 2 years.	Indiana Kids Count Data Book
	The percentage of students sent to RISQ for vaping has increased by 5% over the past 3 school years.	Adams County Community Corrections
2. Drugs and alcohol continue to be easily assessable in Adams County while arrest rates remain low.	56% of the cases monitored by Adams County Community Correctons are related to illegal drug and/or alcohol use.	Adams County Community Corrections
	18.2% of Adams County residents admitted to excessive drinking.	Indiana Prevention Resource Center
	Drug related arrests in Adams County have declined by 12% since 2019.	Indiana Management Performance Hub
3. Citizens of Adams County have limited access to prosocial activities and programs as a result of limited opportunity and the cost associated with them leading to increased drug and alcohol abuse.	11.9% of families in Adams County with children under 18 years old are living below the poverty level.	Indiana Prevention Resource Center
	13% of the citizens in Adams County are uninsured.	Indiana Prevention Resource Center
	65% of Adams County youth surveyed desired more local prosocial activities.	City of Decatur



### 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.*

Problem Statements	What can be done (action)?
1. The use and abuse of alcohol, nicotine, and drugs by youth remains high as a result of low engagement in youth focused programming in the community.	<ol style="list-style-type: none"><li>1. Support school based functions, activities, and groups that are focused on teaching students the harmful effects of drugs, alcohol, and nicotine.</li><li>2. Support community based youth education programs that are evidence based regarding the danger and impact of substance abuse.</li><li>3. Provide resource cards to all students in all three public high schools.</li></ol>
2. Drugs and alcohol continue to be easily assessable in Adams County while arrest rates remain low.	<ol style="list-style-type: none"><li>1. Support local law enforcement's efforts to enforce Federal, State, and local laws addressing ATOD.</li><li>2. Support efforts to increase harm reduction and community outreach prevention strategies.</li><li>3. Support community based efforts to reduce drug and alcohol abuse.</li></ol>
3. Citizens of Adams County have limited access to prosocial activities and programs as a result of lack of opportunity and the cost associated with them leading to increased drug and alcohol abuse.	<ol style="list-style-type: none"><li>1. Provide support/funding to MH/SUD providers to improve access to services for clients in need of financial assistance.</li><li>2. Support community based prosocial activities/events that are drug and alcohol free.</li><li>3. Support community based adult education programs that are prosocial and evidence based regarding the danger and impact of substance abuse.</li></ol>

#### 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.*

<b>Problem Statement #1</b>
Goal 1 To reduce the number of youth referred to probation for alcohol and drug use by 2% in three years
Goal 2 To reduce the number of youth suspended from school for using drugs, alcohol or vaping by 5% in 3 years.
<b>Problem Statement #2</b>
Goal 1 To reduce the number of adult drug overdoses in Adams County by 5% in 3 years.
Goal 2 To reduce the number of adult drug related arrests in Adams County by 2% in 3 years.
<b>Problem Statement #3</b>
Goal 1 To reduce the number or alcohol related driving arrests in Adams County by 3% in three years.
Goal 2 To reduce the number of youth arrested for underaged drinking in Adams County by 3% in three years.

### Step 5: Plans to Achieve Goals

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

Problem Statement #1	Steps
<p>Goal 1</p> <p>To reduce the number of youth referred to probation for alcohol and drug use by 2% in three years</p>	<ol style="list-style-type: none"><li>1. Fund local DFAC groups at middle and high schools in Adams County.</li><li>2. Fund programs that provide youth with information and resources related to the dangers of drugs and alcohol.</li><li>3. Fund programs that provide treatment programs that are evidence based and reduce recidivism.</li></ol>
<p>Goal 2</p> <p>To reduce the number of youth suspended from school for using drugs, alcohol or vaping by 5% in 3 years.</p>	<ol style="list-style-type: none"><li>1. Fund local DFAC groups at middle and high schools in Adams County.</li><li>2. Fund programs that provide youth with information and resources related to the dangers of drugs, alcohol and vaping.</li><li>3. Fund programs that provide treatment programs that are evidence based and reduce recidivism.</li></ol>
Problem Statement #2	Steps
<p>Goal 1</p> <p>To reduce the number of adult drug overdoses in Adams County by 5% in 3 years.</p>	<ol style="list-style-type: none"><li>1. Fund and support law enforcement programs in our community.</li><li>2. Fund and support treatment programs to reduce recidivism.</li><li>3. Fund and support Narcan distribution centers.</li></ol>
<p>Goal 2</p> <p>To reduce the number of adult drug related arrests in Adams County by 2% in 3 years.</p>	<ol style="list-style-type: none"><li>1. Fund and support law enforcement programs in our community.</li><li>2. Fund and support treatment programs to reduce recidivism</li><li>3. Fund and support programs that provide support and resources to individuals with a substance use disorder.</li></ol>

Problem Statement #3	Steps
<p><b>Goal 1</b></p> <p>To reduce the number of alcohol related driving arrests in Adams County by 3% in three years.</p>	<ol style="list-style-type: none"> <li>1. Fund and support programs that provide support and resources to individuals with a substance use disorder.</li> <li>2. Fund prosocial programs that are evidence based and reduce recidivism.</li> <li>3. Fund and support community activities/events that are prosocial and are drug/alcohol free.</li> </ol>
<p><b>Goal 2</b></p> <p>To reduce the number of youth arrested for underaged drinking in Adams County by 3% in three years.</p>	<ol style="list-style-type: none"> <li>1. Fund and support programs that provide support and resources to individuals with a substance use disorder.</li> <li>2. Fund prosocial programs that are evidence based and reduce recidivism.</li> <li>3. Fund and support community activities/events that are prosocial and are drug/alcohol free.</li> </ol>



## IV. 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).

Funding Profile		
<b>1</b>	Amount deposited into the County DFC Fund from fees collected last year:	\$24,427.14
<b>2</b>	Amount of unused funds from last year that will roll over into this year:	\$52,967.13
<b>3</b>	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$77,394.27
<b>4</b>	Amount of funds granted last year:	\$32,442.68
Additional Funding Sources (if no money is received, please enter \$0.00)		
<b>A</b>	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
<b>B</b>	Centers for Disease Control and Prevention (CDC):	\$0.00
<b>C</b>	Bureau of Justice Administration (BJA):	\$0.00
<b>D</b>	Office of National Drug Control Policy (ONDCP):	\$0.00
<b>E</b>	Indiana State Department of Health (ISDH):	\$0.00
<b>F</b>	Indiana Department of Education (DOE):	\$0.00
<b>G</b>	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00
<b>H</b>	Indiana Family and Social Services Administration (FSSA):	\$0.00
<b>I</b>	Local entities:	\$0.00
<b>J</b>	Other:	\$0.00
Categorical Funding Allocations		
Prevention/Education: \$19,348.59	Intervention/Treatment: \$19,348.56	Justice Services: \$19,348.56
Funding allotted to Administrative costs:		
Itemized list of what is being funded	Amount (\$100.00)	
Coordinator compensation	\$7030.00	
Office supplies	\$200.00	
Administrative fees	\$500.00	
Community Outreach	\$11,618.56	
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$9,674.29	Goal 1: \$9,674.28	Goal 1: \$9,674.28
Goal 2: \$9,674.30	Goal 2: \$9,674.28	Goal 2: \$9,674.28

