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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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.

Membership List

#	Name	Organization	Race	Gender	Category
1	Robinn Mitchell	Bowen Center	C	F	Treatment/Intervention
2	Angel Tharp	Community Advocate	C	F	Education/Prevention
3	Yvonnne Riege	ARC, Inc.	C	F	Treatment/Intervention
4	Amanda Montague	Elijah Haven	C	F	Treatment/Intervention
5	Jackie Conwell	Westview PD	C	F	Law Enforcement
6	Heidi Moon	Shipshewana PD		F	Law Enforcement
7	Randy Merrifield	JDAI	C	M	Law Enforcement
8	Stan Strater Jr.	Topeka Police		M	Law Enforcement
9	Tim Cleveland	State Excise	C	M	Law Enforcement
10	Tyler Porter	Probation	C	M	Law Enforcement
11	Hannah Boughman	Northeastern Center	C	F	Intervention/Treatment
12	Juan Arroyo	SC Sheriff's Office		M	Law Enforcement
13	Tracy Harker	SC Sheriff's Office	C	M	Law Enforcement
14	Vince Hostetler	Probation	C	M	Intervention/Treatment
15	Jackie Christman	Impact Institute	C	F	Intervention/Education
16	Damon Witherspoon	Prairie Heights High School	C	M	Education/Prevention
17	Shannon Gleason	McMillen Health	C	F	Education/Prevention
18	Christina Blaskie	Parkview LaGrange Hospital	C	F	Intervention/Treatment

19	Jennnifer Holden	Prairie Heights Middle School	C	F	Education/Prevention
20	Angie Zelt	CDFLC Coordinator	C	F	Education/Prevention
21	Jamelle Godlewski	LaGrange First UM Church	C	F	Education/Prevention
22	Richard Yost	Celebrate Recovery	C	M	Intervention/Treatment
23	Jackie Feller	LaGrange County Health Dpt.	C	F	Education/Prevention
24	Alyse Hays	NEC	C	F	Intervention /Treatment
25	Daniel Shelinski	Parks Department	C	M	Education/Prevention
26	Nicholas Byroad	Shipshewana PD		M	Law Enforcement
27	Mista Lauber	Bowen Health		F	Intervention /Treatment
28	Mike Lock	McMillen Health	C	M	Education/Prevention
29	Jeff Campos	JDAI		M	Law Enforcement

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

County Name LaGrange County	
County Population 40.907	
Schools in the community 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

Medical care providers in the community (hospitals, health care centers, medical centers/clinics)
Bowen Health Clinic
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 Health
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 Health
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
Parks Department
Parkview Health
Purdue Extension
Reason 4 Hope
State Excise
Shipshewana Police Department
The Garage
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

What are the substances that are most problematic in your community?
Meth - adults
Fentanyl - adults
Prescription drugs - adults
Alcohol - adults

Meth - youth
THC - youth
Vapes - youth

Alcohol - youth
List all substance use/misuse services/activities/programs presently taking place in the community. AA Bowen Health Elijah Haven 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.[1]

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[1]Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

Risk Factors	Resources/Assets	Limitations/Gaps
1.Availability of drugs and alcohol.	1. Narcan is available at multiple locations throughout the county. 2. Fentanyl test strips are available at multiple locations throughout the county. 3. Drug Court 4. Addictions counseling available. 5. Local prevention and intervention programs. 6. Schools addressing substance abuse topics with their students. 7. MAT is available.	1. Many larger employers are no longer drug testing. 2. Youth don't understand the dangers of vaping. It is often viewed as "safer than smoking". 3. Vapes containing THC are accessible to all ages. 4. Problem area in the county is at the state line where there is a motel known for illegal drug activity. 5. Close proximity to Michigan where marijuana is legal. 6. Generational drug addiction. 7. Lack of knowledge regarding the dangers of alcohol abuse. 8. Difficult to get information to parents about new drug trends. 9. After incarcerations, no available programs. 10. No transitional housing available. 11. No sober living options. 12. Knowing where to find help.
2.Youth alcohol consumption.	1. Youth programs, such as Reason 4 Hope, LCYC, the Parks, and The Garage, are providing youth activities. 2. Youth activities for the Amish community. 3. TeenCourt 4. Agencies offering services to the entire family. 5. Alcohol prevention education available to schools.	1. Generational alcohol addiction. 2. Social norms in some communities such as the Amish. 3. Alcohol consumption among the Amish community continues to be an issue. 4. People unwilling or incapable of accessing services. 5. Families use alcohol as a rite of passage.

		6. Lack of family activities within the community. 7. Knowing where to find help.
3. Mental health disorders.	1. Crisis Intervention Training is offered by Parkview. 2. Bowen Health has opened a walk-in health clinic. 3. Coalition members work together to ensure clients have access to a variety of services. 4. Many mental health outpatient treatment agencies are available. 5. Agencies offering mental health counseling in the schools. 6. Faith-based agencies offering family support. 7. QPR training being offered locally.	1. Lack of transportation to services. 2. Lack of education regarding mental health illness and substance abuse disorders. 3. Increased homelessness. 4. No shelters 5. Mental health stigma keeps people from seeking services. 6. Lack of knowledge regarding mental health services. 7. Knowing where to find help.
Protective Factors	**Resources/Assets**	**Limitations/Gaps**
1. Access to mental health services.	1. Bowen Health walk-in health clinic. 2. In Person and telehealth counseling available. 3. Faith-based programs and churches. 4. Local agencies offer support for the entire family. 5. Mental health counseling offered in the schools through Bowen Center, ARC, NEC, and other agencies.	1. Stigma regarding mental health issues continues to keep individuals from getting help. 2. Parents are often disconnected and unaware of what youth are doing and their social media involvement. 3. Lack of public transportation to access services. 4. People are not aware of mental health services available. 5. Parents not aware of signs of mental health issues in their youth. 6. Not knowing where to get help.

2. Meaningful youth engagement opportunities.	1. Youth programs, such as the Parks, LCYC, Reason 4 Hope, and The Garage, are providing youth activities. 2. Prevention education offered in the schools through McMillen Health. 3. JDAI offers youth events to the Amish community. 4. Schools continue to expand support for the entire family. . 5. Youth serving agencies and faith based organizations offer youth programming	1. Parents are not aware of the dangers of social media and youth (drugs and trafficking). 2. Lack of family activities available within our community. 3. Families often work multiple jobs to make ends meet, leaving little time for engaging with their youth. 4. Youth often don't have transportation to youth events due to parents either not being engaged or working. transportation if the parent is working.
3. Available intervention programs.	1. Impact Institute continues to offer adult education classes. 2. "Handle with Care" is now in place in area schools. 3. LaGrange has several intervention agencies such as Bowen Health, ARC, and NEC. 4. Multiple treatment and intervention programs available. 5. In person and virtual programs are offered. 6. McMillen Health continues to offer prevention education.	1. Individuals may not be aware of programs offered. 2. Lack of public transportation available. 3. Individuals without insurance may not be aware of financial assistance available. 4. Many homes still do not have access to wifi which limits their ability to access online services such as TeleHealth and remote therapy.

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. Alcohol	1. Alcohol is a problem among youth and adults.
2. Illegal Substances	1. Vaping among youth is a problem 2. Adults and youth struggle with addiction. 3. Easy access to marijuana, THC vapes, and other drugs. 4. Adults continue to have drug related offenses. 5. Youths have easy access to vapes. 6. Parents can't identify vapes. 7. Marijuana is an issue among youth and adults. 3. Meth use has increased. 4. Fentanyl is being found more often.
5. Mental Health Disorders	1. Addiction is linked to mental health disorders. 2. More education is needed regarding the connection between mental health issues and addiction. 3. Mental health disorders have increased among youth.

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
Alcohol is a problem among youth and adults.	In 2024, there were 33 alcohol related arrests.	Shipshewana P.D.
	In 2024, 9% of Indiana youth grades 7-12 reported using alcohol at least in the past month.	IYI Kids Count Book
	In 2024, 36.7% of youth reported it was easy to get alcohol.	IYI Kids Count Book
	Above state average number of adults report heavy/binge drinking.	Parkview Community Assessment 2024.
Adults and youth struggle with addiction.	In 2024, there were 29 drug related arrests.	Shipshewana P.D.
	In 2024, Parkview's NaloxBox had 81 Narcan taken, 74 fentanyl test strips taken, and 70 xylazine test strips taken.	Parkview LaGrange Hospital
	In 2024, 6.6% of students grades 7-12 reported using electronic vape products.	IYI Kids Count Book
	Substance use was determined to be a priority area in LaGrange County.	Parkview Community Assessment 2023.

Addiction is linked to mental health disorders.	In 2024, NEC provided services to 476 adults in LaGrange County.	NEC Annual Report
	In 2024, NEC provided services to 113 youth in LaGrange County.	NEC Annual Report
	In 2024, 30.2% 10th-graders reported feeling sad or hopeless almost every day for two weeks or more dropped	Indiana University
	In 2024, 10.1% of Indiana youth reported making a plan to commit suicide.	IYI Kids Count Book
	In 2023, Indiana had only one mental health counselor for every 500 people.	IYI Kids Count Book
	Mental health and substance use disorders have been determined as a priority area in LaGrange County.	Parkview Community Assessment 2023.

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)?
Alcohol is a problem among youth and adults.	1. Support youth alcohol prevention programs. 2. Work to expand coalition members to include additional alcohol treatment programs. 3. Work to expand community awareness regarding the dangers of alcohol misuse.
Adults and youth struggle with addiction.	1. Work with area schools for early drug prevention programs. 2. Work with area employers to share information about substance use disorders and available resources. 3. Increase coalition members that provide substance use disorder programming.

	4. Increase community awareness regarding the dangers of substance use disorders. 5. Increase social media presence with information regarding substance use disorders.
Addiction is linked to mental health disorders.	1. Educate the community on early warning signs of mental issues in youth and adults. 2. Promote mental health resources on social media. 3. Support area programs that provide mental health counseling.

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.

Problem Statement #1
Goal 1 Increase the number of adults accessing alcohol counseling/support by 2% by April 2027.
Goal 2 Increase youth reached by alcohol prevention programs by 2% by April 2027.
Problem Statement #2
Goal 1 Increase the number of youth receiving substance use disorder education by 2% by April 2027.
Goal 2 Increase the number of adults receiving substance use disorder treatment by 2% by April 2027.
Problem Statement #3
Goal 1 Increase the number of coalition members that provide mental health counseling and/or substance use disorders by five by April 2027.
Goal 2 Increase the number of adults with substance use disorder receiving mental health counseling by 2% April 2027.

Step 5: Plans to Achieve Goals
For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 Support youth alcohol prevention programs.	1. Increase coalition participation from agencies that provide youth programming. 2. Promote Lifeline Law. 3. Support area programs that provide youth programming outside of schools. 4. Support law enforcement and judicial initiatives that address underage drinking.
Goal 2 Work to expand coalition members to include additional alcohol treatment programs.	1. Increase coalition to include additional programs offering alcohol recovery services. 2. Support programs that provide alcohol education. 3. Support law enforcement programs that work to prevent undersage drinking.
Problem Statement #2	**Steps**
Goal 1 Support drug education in area schools	1. Work to bring additional vaping education to area youth and educate parents on the dangers of vaping and how to recognize vapes. 2. Work to support schools to decrease vaping. 3. Work to educate parents on the dangers and warning signs of drug use.
Goal 2 Increase coalition members that provide addiction recovery services.	1. Support law enforcement and judicial initiatives that address substance use among youth and adults. 2. Increase awareness of available programs and resources in the community including those for treatment and recovery for adults.
Problem Statement #3	**Steps**
Goal 1 Educate the community on mental health disorders and support services.	1. Increase partnerships with local schools. 2. Support programs that bring prevention programs to area youth. 3. Increase partnerships with local youth serving agencies. 4. Use social media platforms to promote community awareness.

Goal 2 Support area programs that provide mental health counseling.	1. Promote and support counseling services for youth and adults including services to the financially disadvantaged. 2. Increase awareness of available programs and resources in the community. 3. Use social media to help spread mental health education.

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		
1	**Amount deposited into the County DFC Fund from fees collected last year:**	**$23,363.54**
2	**Amount of unused funds from last year that will roll over into this year:**	**$1,861.55**
3	**Total funds available for programs and administrative costs for this year (Line 1 + Line 2):**	**$25,225.09**
4	**Amount of funds granted last year:**	**$22.616.49**
Additional Funding Sources (if no money is received, please enter $0.00)		
A	**Substance Abuse and Mental Health Services Administration (SAMHSA):**	**$0.00**
B	**Centers for Disease Control and Prevention (CDC):**	**$0.00**

C	Bureau of Justice Administration (BJA):	$0.00
D	Office of National Drug Control Policy (ONDCP):	$0.00
E	Indiana State Department of Health (ISDH):	$0.00
F	Indiana Department of Education (DOE):	$0.00
G	Indiana Division of Mental Health and Addiction (DMHA):	$0.00
H	Indiana Family and Social Services Administration (FSSA):	$0.00
I	Local entities:	$0.00
J	Other:	$0.00

Categorical Funding Allocations

Prevention/Education: $6,306.28	Intervention/Treatment: $6,306.27	Justice Services: $6,306.27

Funding allotted to Administrative costs:

Itemized list of what is being funded	*Amount ($100.00)*
Coordinator compensation	$5,817.82
Office supplies	$488.45

Funding Allocations by Goal per Problem Statement:

Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: $3,153.14	Goal 1: $3,153.14	Goal 1: $3,153.14
Goal 2: $3,153.14	Goal 2: $3,153.14	Goal 2: $3,153.14