

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



*Behavioral Health Division*

## **Comprehensive Community Plan**

County: Pike

LCC Name: Commission to End Drug Abuse

LCC Contact: Lindsey Denno

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City: Petersburg

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County Commissioners: Pike County Courthouse

Address: 801 Main St

City: Petersburg

Zip Code: 47567

## Vision Statement

What is your Local Coordinating Council's vision statement?

CEDA's vision is a community where misuse and abuse of alcohol, tobacco, and drugs is not easily accessible or socially acceptable.

## Mission Statement

What is your Local Coordinating Council's mission statement?

CEDA's mission is to reduce the incidence, prevalence, costs, and consequences of alcohol, tobacco, and other drug use and abuse in Pike County, so as to improve the quality of life for all citizens. Our mission can be accomplished through the efforts of citizens working together in a comprehensive manner involving all elements of our respective communities.

| Membership List |                 |                              |      |        |                        |
|-----------------|-----------------|------------------------------|------|--------|------------------------|
| #               | Name            | Organization                 | Race | Gender | Category               |
| 1               | Lindsey Denno   | Local Resident               | W    | F      | Prevention/Education   |
| 2               | Leann Burke     | Crisis Connection            | W    | F      | Treatment/Intervention |
| 3               | Kyle Mills      | Petersburg Police            | W    | M      | Criminal Justice       |
| 4               | Briar Meadors   | Pike County Sheriff          | W    | M      | Criminal Justice       |
| 5               | Dawn Lehmkuhler | Tobacco Initiative           | W    | F      | Prevention/Education   |
| 6               | Amanda Howald   | Health Dept                  | W    | F      | Prevention/Education   |
| 7               | Lauren Gray     | Pike County Library          | W    | F      | Prevention/Education   |
| 8               | Brooke Goble    | Purdue Extension             | W    | F      | Prevention/Education   |
| 9               | Catherine Bush  | Family Health Center         | W    | F      | Prevention/Education   |
| 10              | Buck Seger      | School Resource Office/ DARE | W    | M      | Criminal Justice       |
| 11              | Errin Weisman   | Addictionologist             | W    | F      | Treatment/Intervention |
| 12              | John Allender   | Family Health Center         | W    | M      | Treatment/Intervention |
| 13              | Trent Barrett   | CVS Pharmacy                 | W    | M      | Prevention/Education   |
| 14              | Jessica Frick   | LCSW                         | W    | F      | Prevention/Education   |
| 15              | Kayla Stiles    | Safe Haven                   | W    | F      | Treatment/Intervention |
| 16              | Josh Graves     | Safe Haven                   | W    | M      | Treatment/Intervention |
| 17              |                 |                              |      |        |                        |
| 18              |                 |                              |      |        |                        |
| 19              |                 |                              |      |        |                        |
| 20              |                 |                              |      |        |                        |

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### LCC Meeting Schedule:

CEDA meets on the first Thursday of each Month at Calorita, Main St. Petersburg, at 12 pm EST. Meetings are also available via zoom for those who cannot meet in person.

## 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

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| <b>County Name</b><br>Pike County  |
| <b>County Population</b><br>12,106 as of July 1, 2023 (U.S. Census Bureau)   |
| <b>Schools in the community</b><br>Petersburg Elementary School<br>Winslow Elementary School<br>Otwell Miller Academy<br>Pike Central Middle/High School<br>Home School options  |
| <b>Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.)</b><br>Deaconess Clinic-Petersburg<br>Petersburg Family Medicine<br>Family Health Center<br>Pike County Health Dept<br>Weisman Medical Services |
| <b>Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)</b><br>No hospital in the county<br>Family Health Center<br>Weisman Medical Services, LLC     |
| <b>Service agencies/organizations</b><br>United Way<br>Tri-Cap<br>Youth First<br>Purdue Extension  |

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| Crisis Connection<br>Pike County Health Department<br>Indiana Youth Services Assoc.<br>CASA<br>Pike County Library<br>Pike County Tobacco Initiative  |
| <b>Local media outlets that reach the community</b><br>Press Dispatch<br>WBTO radio 102.3<br>WAMW the Bullet, 107.9<br>Chamber of Commerce newsletter<br>Sheriff's Office Facebook page<br>Petersburg Police Dept. Facebook page<br>Tri-Cap email newsletter<br>Pike County Health Dept on Facebook<br>CEDA Facebook page   |
| <b>What are the substances that are most problematic in your community?</b><br>Alcohol<br>Opioids<br>Tobacco use and vaping<br>Methamphetamine<br>Marijuana   |
| <b>List all substance use/misuse services/activities/programs presently taking place in the community</b><br>Family Health Center - outpatient group treatment services<br>Youth First - school-based youth and family prevention services<br>Pike County Health Department - tobacco cessation services<br>Wabash Valley Corrections with Samaritan Center - OPIOID Response Program<br>River of Life Church - Celebrate Recovery<br>Tobacco Cessation<br>CEDA |

## 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. Limited Prevention & Recovery Resources               | 1. Family Health Center-Substance Use Disorders Services<br><br>2. Weisman Medical Services-Addiction Medicine<br><br>3. Monday's-Celebrate Recovery @ River of Life Church (342 E CR 300N, Petersburg, IN) – 6:00pm<br>Church of Nazarene, (106 Washington St, Winslow, IN) – 7:30pm {Open} | 1. Limited reach of media and limited means of public communication for increasing awareness.<br><br>2. Citizens need to travel out of town for some services<br><br>3. In a small town, people worry about anonymity |
| 2. Skewed perceptions of the use of alcohol and tobacco. | 1. SADD<br><br>2. DARE<br><br>3. Youth Groups in the community churches<br><br>4. "Too Good for Drugs and Violence" is facilitated at Petersburg Elem by FHC Prevention Services<br><br>5. "Catch My Breath" a youth vaping prevention program is available                                  | 1. Multi-generational use<br><br>2. Lack of non-alcoholic activities with the community, especially for the youth.<br><br>3. Stigma surrounding prevention  |

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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.

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| 3. Family substance use/Intergenerational alcohol & substance abuse | 1.Faith based communities<br>2.Prevention programming including Head Start, TriCap, Celebrate Recovery<br>3.Resources available at Family  | 1. 19% of adults report excessive alcohol drinking (Memorial Hospital 2023 Community Needs Assessment)<br>2. 20% of people over 18 report smoking (Memorial Hospital 2023 Community Needs Assessment)<br>3. Limited Involvement with Treatment Providers<br>4. 10.8 % of households in poverty |
| <b>Protective Factors</b>   | <b>Resources/Assets</b>  | <b>Limitations/Gaps</b>  |
| 1.Existing coalition partnerships and community programs            | 1. Local coalition is gaining in member numbers<br>2.Diversity amongst coalition participants and agencies<br>3.Support of community based events and activities                             | 1.Uninvolved community entity participation<br>2.Same/repeat involvement with members<br>3.No youth representation or participation<br>4. Still a lot of people in the county who do not know that the coalition exists and what it stands for/does  |
| 2.Multidisciplinary Support Programs                                | 1. Family Health Center, Weisman Medical Services<br>2. DCS, TTR Haven Over the Hilltop<br>3. Law Enforcement, DARE program<br>4. CEDA partners collaborating on a community education plan. | 1. Small population leads to anonymity concerns<br>2. Stigma surrounding those admitting they need help/asking for help<br>3.Support groups work well with one another in the community for most events  |

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| 3. Positive family connection and caring community | 1. Churches and faith based programming. Youth groups.<br><br>2.Community based programming. Pike County Library.<br><br>3.School Programming. Events such as the movie “She’s on the Run” that relates to mental health for youth and online predator presentation presented by local tobacco coalition. | 1.Hard to change the culture of a community<br><br>2.Transportation barriers, no public transportation<br><br>3. Limited engagement from high risk populations |
|--|---|--|

### 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. Limited Prevention & Recovery Resources | 1. Adults and youth in Pike County have limited resources for ATOD (alcohol, tobacco & other drugs) prevention, treatment, and law enforcement.<br>.<br>2. Lack of education surrounding prevention and recovery resulting in stigma attached to vulnerable populations. |

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|   | 3. Limited substance abuse treatment program options and little community awareness of the programs that are available.  |
| 2. Skewed perceptions of the use of alcohol and tobacco.            | <p>1. Children in Pike Co. are removed from home due to drug abuse, among other factors.</p> <p>2. Culture of drinking and smoking is more acceptable in a small, rural town.</p> <p>3. There is increased availability of alcohol and tobacco to youth due to skewed perceptions from adults in the community.</p>  |
| 3. Family substance use/Intergenerational alcohol & substance abuse | <p>1. Individuals with a family history of drug abuse have an 8-fold increase in the likelihood of drug use, suggesting familial transmission of substance abuse disorders (Merikangas et al., 1998).</p> <p>2. Lack of education and awareness among generational families regarding substance use leads to abuse, neglect, and increased criminal activity.</p> <p>3. Decreased parental correctness due to family history of drug and alcohol abuse</p> |

## 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. There is increased availability of alcohol and tobacco to youth due to skewed perceptions from adults in the community. | <p>19.8% of adults in Pike County, IN smoke.</p> <p>Research shows that people who start drinking before the age of 15 are at a higher risk for developing alcohol use disorder (AUD) later in life. For example, adults ages 26 and older who began drinking before age 15 are 3.6 times more likely</p> | <p>The State of Tobacco Control Pike County.<br/> <a href="#">Pike-County-2023.pdf</a></p> <p>National Institute of Alcohol Abuse and Alcoholism<br/> <a href="#">Get the Facts About Underage Drinking   National Institute on Alcohol Abuse and Alcoholism (NIAAA)</a></p> |



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|  | to report having AUD in the past year than those who waited until age 21 or later to begin drinking.  |   |
| 2. Adults and youth in Pike County have limited resources for ATOD (alcohol, tobacco & other drugs) prevention, treatment, and law enforcement.  | <p>There was one primary care physician per 3,040 people in Pike County, Indiana.</p> <p>A 2019 study found that on top of the usual barriers to healthcare access for rural people, such as travel time and cost of care, there was a lack of treatment programs available in rural areas and a negative perception of treatment for substance use disorder among rural providers.</p>   | <p><a href="#">Primary Care Physicians   County Health Rankings &amp; Roadmaps</a></p> <p>Rural Health Information Hub</p> <p><a href="#">Substance Use and Misuse in Rural Areas Overview - Rural Health Information Hub</a></p> |
| 3. Lack of education and awareness among generational families regarding substance use leads to abuse, neglect, and increased criminal activity. | <p>Indiana also has one of the nation's largest increases in children being removed from their homes due to family drug use.</p> <p>Children with an addicted family member are four times more likely to misuse drugs or alcohol.</p> <p>In 2016, more than 50 percent of cases of children removed from their homes by the Indiana Department of Child Services were due to drug or alcohol use by a parent—a rate that rose more than 50 percent since 2013.</p> | <p>Responding to the Addictions Challenge Grand Challenge</p> <p><a href="#">The Crisis in Indiana: Understanding the Crisis: Addictions: Indiana University</a></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.*

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| 1. There is increased availability of alcohol and tobacco to youth due to skewed perceptions from adults in the community.                       | 1. Promote education for adults on the risks of underage drinking and tobacco.<br><br>2. Provide education for local youth on the risks associated with underage drinking and tobacco use.<br><br>3. Support local organizations focused on alcohol and tobacco reduction.   |
| 2. Adults and youth in Pike County have limited resources for ATOD (alcohol, tobacco & other drugs) prevention, treatment, and law enforcement.  | 1. Partner with the two local Mental Health providers in the county to increase awareness to youth regarding prevention/education/law enforcement<br><br>2. Partner with local organizations to outreach to adults & families within the community to increase awareness and provide opportunities for treatment & prevention.<br><br>3. Provide funding and/or promotional support to local Mental Health organizations to promote opportunities for community awareness, treatment, prevention, etc. |
| 3. Lack of education and awareness among generational families regarding substance use leads to abuse, neglect, and increased criminal activity. | 1. Collaborate with other organizations to promote education and awareness on ACEs (Adverse Childhood Experiences) and how they affect a person's health throughout their lifetime<br><br>2. Team up with local organizations in an effort to provide activities that families can do together that do not involve any alcohol or other substances<br><br>3. Provide support to any community based programming to decrease the culture of normalcy for drug and alcohol abuse in our community        |

#### 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**

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| Goal 1: In the next year, provide education content to local youths, with a goal of reaching at least 50 kids, providing information on the risk of drinking and tobacco use.   |
| Goal 2: Over the next year, support at least one local organization focused on alcohol and tobacco reduction by providing funding/resources that will lead to a measurable decrease of usage.   |
| <b>Problem Statement #2</b>   |
| Goal 1: During the next year, partner with a local organization to help develop/improve outreach programs aimed at increasing awareness of treatment options and preventive measures for health issues affecting adults and families. |
| Goal 2 In the year 2025/26, allocate funding to at least 1 local mental health organizations aimed at promoting opportunities for treatment and prevention of mental health issues.   |
| <b>Problem Statement #3</b>   |
| Goal 1 Within twelve months, provide volunteer time/funding to any local substance abuse prevention program focused on decreasing the culture of normalcy surrounding drug and alcohol abuse.”  |
| Goal 2 Team up with at least 3 local organizations and organize a family friendly event that promotes substance free activities, attracting at least 25 people.   |

### Step 5: Plans to Achieve Goals

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

| Problem Statement #1  | Steps  |
|---|--|
| Goal 1<br>Provide education for local youth on the risks associated with underage drinking and tobacco use. | <ol style="list-style-type: none"> <li>1. Support prevention and education programs provided through the schools and other community organizations, with an emphasis on evidence-based strategies.</li> <li>2. Support Pike County Tobacco Initiative Program at local events</li> <li>3. Provide appropriate equipment, training, staffing, and materials to aid enforcement agencies in addressing tobacco and alcohol issues with youth.</li> </ol> |
| Goal 2<br>Support local organizations focused on alcohol and tobacco reduction.                             | <ol style="list-style-type: none"> <li>1. Encourage the facilitation of treatment for individuals identified with alcohol dependency.</li> </ol>   |

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|   | <p>2.Refer individuals to Pike Co Health department for smoking cessation support</p> <p>3. Provide materials and supplies for alcohol &amp; tobacco awareness prevention, intervention, and education programming, with an emphasis on evidence-based strategies and increasing protective factors.</p>  |
| <b>Problem Statement #2</b>   | <b>Steps</b>  |
| <p><b>Goal 1</b><br/>Partner with local organizations to outreach to adults &amp; families within the community to increase awareness and provide opportunities for treatment &amp; prevention.</p> | <p>1.Provide supportive funding to prevention/education initiatives for adults and youth in Pike County, with an emphasis on evidence based programs and increasing protective factors.</p> <p>2. Support coordination among prevention/education, treatment, and law enforcement providers by sharing information across multiple forums, such as meetings, community events, email lists, and traditional and social media.</p> <p>3. Provide appropriate resources for enforcement agencies to implement and enforce laws and policies regulating alcohol, tobacco, and other drug distribution, use, and abuse.</p> |
| <p><b>Goal 2</b><br/>Provide funding and/or promotional support to local Mental Health organizations to promote opportunities for community awareness, treatment, prevention,etc.</p>               | <p>1.Provide funding support for the operation of local addictions treatment and recovery programs.</p> <p>2.Promote access to treatment services by promoting availability of services across multiple forums.</p> <p>3.Support referrals to treatment and/or recovery programs for individuals identified with addictions.</p>  |

| <b>Problem Statement #3</b>   | <b>Steps</b>  |
|---|---|
| <p><b>Goal 1</b><br/> Provide support to any community based programming to decrease the culture of normalcy for drug and alcohol abuse in our community</p>                    | <p>1.Attend local events focused on decreasing drug/alcohol use and normalizing events without the need for alcohol/tobacco</p> <p>2.Provide supportive funding to prevention/education initiatives for programming in Pike County, with an emphasis on evidence based programs and increasing protective factors.</p> <p>3.Support coordination among prevention/education, treatment, and law enforcement providers by sharing information across multiple forums, such as meetings, community events, email lists, and traditional and social media.</p> |
| <p><b>Goal 2</b><br/> Team up with local organizations in an effort to provide activities that families can do together that do not involve any alcohol or other substances</p> | <p>1. Support local programs which emphasize good choices.</p> <p>2. Provide supportive funding to prevention/education initiatives for adults and youth in Pike County, with an emphasis on alcohol and tobacco free programs and increasing protective factors.</p>   |

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|  | 3.Partner with Red Ribbon week on substance abuse awareness. |
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#### 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:                     | \$19,082.00.                    |
| <b>2</b>  | Amount of unused funds from last year that will roll over into this year:                    | \$189.06                        |
| <b>3</b>  | Total funds available for programs and administrative costs for this year (Line 1 + Line 2): | \$19,271.06                     |
| <b>4</b>  | Amount of funds granted last year:   | \$12,097.37                     |
| 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: United Way   | \$294.80                        |
| <b>J</b>  | Other:   | \$0.00                          |
| Categorical Funding Allocations   |  |                                 |
| Prevention/Education:<br>\$4,818.06                                       | Intervention/Treatment:<br>\$4,818.00  | Justice Services:<br>\$4,818.00 |
| Funding allotted to Administrative costs:                                 |  |                                 |
| <i>Itemized list of what is being funded</i>                              |  | <i>Amount (\$100.00)</i>        |
| Coordinator compensation  |  | \$4,817.00                      |
| Office supplies   |  | \$0                             |
| Funding Allocations by Goal per Problem Statement:                        |  |                                 |
| Problem Statement #1  | Problem Statement #2   | Problem Statement #3            |
| Goal 1: \$2,409.03  | Goal 1: \$2,409.00   | Goal 1: \$2,409.00              |
| Goal 2: \$2,209.03  | Goal 2: \$2,409.00   | Goal 2: \$2,409.00              |

