

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Sullivan County

LCC Name: Sullivan County Local Coordinating Council

LCC Contact: Sarah Bryant and Kryslin Kendall

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County Commissioners: Robert Davis, Brant Ford, John Waterman

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City: Sullivan

Zip Code: 47882

Vision Statement

What is your Local Coordinating Council's vision statement? It is the vision of the coalition to strive to create an environment that promotes all citizens with a strong focus on youth and families. Sullivan County Partners for a Drug-Free Sullivan County works to achieve this mission by providing information to the community, enhancing skills, providing support, changing consequences, educating, and informing about modifying or changing policies.

Mission Statement

What is your Local Coordinating Council's mission statement? The mission of the Sullivan County LCC is to reduce the incidence of substance abuse in Sullivan County through youth prevention and education, treatment, and coordination with other agencies. It is the vision of the coalition to strive to create an environment that promotes all citizens with a strong focus on youth and families.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Christina Hall	Supervision Center	W	F	Treatment
2	Matthew Price	Shelburn Police Reserve Association/NE SC Police Chief	W	M	Law Enforcement
3	Samantha Phegley	Southwest School Corporation	W	F	Education
4	Kathy Lawrence	Hamilton Center/Crisis Diversion Center Director	W	F	Intervention
5	Lindsay Hunter	Harsha	W	F	Intervention
6	Cheryl Casselman	Purdue Extension	W	F	Prevention
7		CASA			Non-profit
8	Brittany Nesbitt	Ruth House	W	F	Treatment
9	Joyce Cox	Freedom Connection Recovery Center	W	F	Treatment
10	Jason Bobbitt	Sullivan County Sheriff's Department	W	M	Law Enforcement
11	Josh Carry	Sullivan County Sheriff's Department	W	M	Law Enforcement
12	Lindsay Carry	Sullivan County Health Department	W	F	Prevention/Treatment
13	Erin Ledune	Sullivan County	W	F	Prevention/Treatment

		Community Hospital			
14	Angie Daugherty	Sullivan County Probation Department	W	F	Law Enforcement / Intervention
15	Sarah Bryant	Recovery Cafe Sullian	W	F	Treatment /
16	Kryslin Kendall	Recovery Cafe Sullivan	W	F	Treatment /
17	Heather Slavens	Excel Center	W	F	Education
18	April Cox	Sullivan County Public Library	W	F	Education
19	Matt Hayes	Hamilton Center	W	M	Treatment
20	Terri Roberts	Southwest School Corporation	W	F	Prevention
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LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

February 4, 2025

March 4, 2025

April 1, 2025

May 6, 2025

June 3, 2025

August 5, 2025

September 2, 2025

October 7, 2025

December 2, 2025

We do not meet in January, July, or November. This is submitted to the Sullivan Daily Times and printed by the newspaper.

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 Sullivan
County Population 20,778
Schools in the community: Dugger Union Community Schools Southwest School Corporation Northeast School Corporation Master's Class
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Sullivan County Community Hospital Sullivan Family Practice Lakeside Medical Quickecare FPA Health Connections Harsha Outpatient
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Hamilton Center Christina Hall Counseling Services Murphy Urban Associates Amanda Hargreave Counseling Turning Leaf Lyndsey Grant
Service agencies/organizations

<p>Chances and Services for Youth</p> <p>United Way</p> <p>Head Start/First Steps</p> <p>PACE</p> <p>Mental Health America West Central Indiana</p> <p>CODA</p> <p>Wabash Recovery Center</p> <p>Freedom Connection Recovery Center</p> <p>Recovery Café</p> <p>Ruth House</p> <p>Salvation Army</p>
<p>Local media outlets that reach the community</p> <p>Sullivan Daily Times</p> <p>WTHI-TV</p> <p>WNDI</p> <p>WTWO-TV</p>
<p>What are the substances that are most problematic in your community?</p> <p>Methamphetamines</p> <p>Alcohol</p> <p>Tobacco/Nicotine/Vaping</p> <p>Prescription drugs- narcotics and opioid abuse Fentanyl</p> <p>Marijuana/THC/Vaping/Dabs</p> <p>Delta products</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community</p> <p>Hamilton Center- including the Matrix program, counseling services and IOP.</p> <p>Private counseling services</p> <p>Sullivan County Community Hospital Behavioral Health</p> <p>Recovery Café/Next Steps</p> <p>Freedom Connection Recovery Center</p> <p>MAT services at WINN and Regional Hospital</p> <p>AA and NA meetings</p> <p>Alanon</p> <p>Ruth House Residential Treatment Program for Women</p> <p>Probation</p> <p>First offense education services.</p> <p>INDEPTH/NOT</p> <p>Turning Leaf</p> <p>MRT at Freedom Connection Recovery Center</p>

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

Risk Factors	Resources/Assets	Limitations/Gaps
1. Youth often overestimate peer substance use. Youth lack prosocial community activities and interactions with peers.	1. Hamilton Center, Inc., schools, MHAWCI, Catch My Breath anti vaping program, Big Brothers Big Sister program. 2. Too Good for Drugs prevention programming by MHAWCI and CASY 3. Prevention programs like Botvin Life Skills and counselors at each school	1. Youth and parents' understanding of ramifications of substance use by youth. 2. Availability of organized after school programming and activities. 3. Transportation and funding relating to participation
2. Access (or knowledge of access) to prevention and intervention is limited in rural communities.	. 1. Community Mental Health Center (Hamilton Center) and other mental health and SUD treatment providers 2. E-Intervention 3. Recovery Cafe	1. Lack of intervention and treatment resources for youth and lack of treatment and intervention for gateway use or before stage 4 intervention 2. Lack of resources for law enforcement lead treatment or intervention/lack of officer CIT training/lack of treatment resources for individuals who are incarcerated 3. Transportation and funding relating to participation in intervention and treatment. Lack of treatment that encompasses the whole family.

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

3. Generational substance abuse within families and stigma related to generational SUD and co-occurring mental health conditions	<p>1. Community Mental Health Center (Hamilton Center) and other mental health and SUD treatment providers.</p> <p>2. School corporations with school supported substance use education.</p> <p>3. Faith based organizations</p>	<p>1. Poverty and transportation - lack of knowledge and ability to access resources</p> <p>2. Family based trauma and experience. Stigma</p> <p>3. Availability of awareness and information relating to substance abuse.</p>
Protective Factors	Resources/Assets	Limitations/Gaps
1. Schools offer youth opportunities and rewards for prosocial involvement.	<p>1. Prevention and prosocial programs are available at school</p> <p>2. Robust school counseling programs</p> <p>3. CASY, MHAWCI, UWWV, FCRC and other organizations provide extra prevention programming in schools</p>	<p>1. Access limitations to after school and extracurricular events</p> <p>2. Difficulty in engaging family in afterschool events</p> <p>3. Students have low commitment to school</p>
2. Families offer youth opportunities and rewards for prosocial involvement.	<p>1. Faith based opportunities for families in the community</p> <p>2. Recreational opportunities for families in the community</p> <p>3. Adult and family-oriented awareness programming and Substance Free Alternative Events. Information from Purdue Extension, CASY, MHAWCI, FCRC</p>	<p>1. Outside of faith-based activities it is difficult to find family activities</p> <p>2. Lack of interest or awareness of alternative activities</p> <p>3. Lack of adult awareness of substance use, prevention, and intervention and the consequences of substance use</p>
3. The community has social supports available	<p>1. Sullivan County has several social service agencies in the county.</p> <p>2. There is collaboration between the social service agencies.</p> <p>3. Social Service agencies provide a wide range of services for those in need.</p>	<p>1. Transportation and access to agencies is difficult in rural areas.</p> <p>2. Some resources such as housing and counseling services have waiting lists.</p> <p>3. Documentation to receive services is difficult for some individuals and may limit their ability to receive resources. Justice involved individuals may</p>

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. Youth often overestimate peer substance use. Youth lack prosocial community activities and interactions with peers.	1. There is a lack of community activities for youth outside of school, sports, or faith-based organizations. 2. Adults express an attitude of acceptance and /or lack of education regarding youth using substances in an illegal manner. 3. Lack of access, knowledge, commitment and engagement of activities makes it difficult for youth and their families to access community prosocial activities for youth.
2. Access (or knowledge of access) to substance use disorder prevention, and mental health conditions is limited for youth and adults in rural communities.	1. Education and awareness of substance use disorder and co-occurring mental health conditions in Sullivan County is lacking. 2. Recovery, counseling, law enforcement led treatment, referral for treatment and education services for individuals and families with substance abuse disorder and co-occurring mental health conditions are limited in Sullivan County. There is a need to increase the communication between service organizations, schools, and law enforcement/first responders regarding referrals and opportunities to address needs.

	3. There is a lack of resources for law enforcement lead treatment or intervention/lack of officer CIT training/lack of treatment resources for individuals who are incarcerated
3. Generational substance abuse within families and stigma related to generational SUD and co-occurring mental health conditions	<p>1. Adults and youth in Sullivan County abuse substances including, but not limited to, alcohol, methamphetamine, prescription drugs, marijuana, and nicotine/vaping products.</p> <p>2. Adults and youth underappreciate the causes, ramifications and consequences (short and long term) of substance abuse.</p> <p>3. Poverty, transportation, lack of alternative activities and other accessibility issues contribute to substance abuse by youth and adults.</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. Lack of access, knowledge, commitment and engagement of activities makes it difficult for youth and their families to access community pro-social activities for youth.	INYS Sullivan County Data Community: Rewards for prosocial involvement Low protection 8 the grade 30.5% 10 the grade 32.1% 12 the grade 34.2%	Indiana Youth Survey (INYS) Sullivan County (2024 data)
2. Recovery, counseling, law enforcement led treatment, referral for treatment and education services for	Sullivan County ratio of mental health providers to individuals- 2297:1	Indiana Youth Kids Count Data Dashboard (2024)

<p>individuals and families with substance abuse disorder and co-occurring mental health conditions and trauma are limited in Sullivan County.</p> <p>There is a need to increase the communication between service organizations, schools, and law enforcement/first responders regarding referrals and</p>	<p>95 Children in need of services (CHINS) court cases</p> <p>45 child removals 25 due to drugs or alcohol</p>	<p>Indiana University Indiana Prevention Center Data (2023)</p>
<p>3. Adults and youth underappreciate the causes, ramifications and consequences (short and long term) of substance abuse.</p>	<p>65 school suspensions or expulsions (data includes in-school and out of school)</p> <p>CRAFFT Scores showing drug or alcohol used to feel better.</p> <p>7th grade- 2.9%</p> <p>8th grade- 4.7%</p> <p>9th grade- 5.4%</p> <p>10th grade- 7.4%</p> <p>11th grade- 8.9%</p> <p>12th grade- 10%</p> <p>96 students attend INDEPTH and alternative to suspension program for Nicotine (Sullivan County Schools, 2023-2024).</p>	<p>Indiana University Indiana Prevention Center Data (2023)</p> <p>Indiana Youth Survey (INYS) Sullivan County data (2024)</p> <p>Sullivan County Schools (2025)</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.

Problem Statements	What can be done (action)?
<p>1. Lack of access, knowledge, commitment and engagement of activities makes it difficult for youth and their families to access community prosocial activities for youth and adults.</p>	<p>1.Support and fund evidence based alternative activities.</p> <p>2.Support and fund initiatives and activities that promote pro-social activities for youth and families.</p>

	3. Support and share events and activities that increase community-based awareness that address substance abuse.
2.. Recovery, counseling, law enforcement led treatment, referral for treatment and education services for individuals and families with substance abuse disorder and co-occurring mental health conditions and trauma are limited in Sullivan County. There is a need to increase the communication between service organizations, schools, and law enforcement/first responders regarding referrals and opportunities to address needs.	<p>1. Support intervention and counseling initiatives with increased funding opportunities for these services.</p> <p>2. Support and share events and activities that increase community-based awareness that address substance abuse.</p> <p>3. Increase and promote shared communication between referral sources and treatment providers using a variety of different communication methods.</p>
3. Adults and youth underappreciate the causes, ramifications and consequences (short and long term) of substance abuse.	<p>1. Address the need to support substance abuse programming that increases resistance skills for youth and adults.</p> <p>2. Support Justice and Law Enforcement equipment and training that address offenders who have alcohol and drug abuse as a primary or secondary reason for arrest.</p> <p>3. Support intervention and treatment initiatives that increase the availability of assessments, treatment, counseling support and aftercare services.</p>

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 Lack of access, knowledge, commitment and engagement of activities makes it difficult for youth and their families to access community pro-social activities for the community

Goal 1 The number of youth and adults who engage in community prosocial activities that prevent substance misuse will increase by 4% over the next year. This would include evidence based alternative events.

Goal 2 The LCC will work to increase information dissemination regarding prosocial activities that prevent substance abuse by using information sharing between members and creating a social media site to share information with the community. This will be monitored for success using analytics that monitor engagement and tracking attendance at events.

Problem Statement #2 Recovery, counseling, law enforcement led treatment, referral for treatment and education services for individuals and families with substance abuse disorder and co-occurring mental health conditions and trauma are limited in Sullivan County. There is a need to increase the communication between service organizations, schools, and law enforcement/first responders regarding referrals and opportunities to address needs.

Goal 1 The number of youth and adults seeking treatment and intervention options for substance abuse disorder and co-occurring mental health conditions and trauma will increase 5% over the next year

Goal 2 The LCC will work to increase LCC participation by inviting new and inactive members to meetings. The LCC will encourage collaborations between members and the community to increase referrals by 2% to treatment and resources in the community over the next year

Problem Statement #3 Adults and youth underappreciate the causes, ramifications and consequences (short and long term) of substance abuse.

Goal 1 The number of youth and adults who participate in evidence-based substance abuse awareness programs/prevention awareness will increase by 6% over the next year. This will be monitored by schools and drug free communities for participation

Goal 2 The LCC will support programs that increase the amount of controlled or illegal substances seized by law enforcement agencies or anonymously disposed of by community members by 2% over the next year.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 The number of youth and adults who engage in community prosocial activities that prevent substance misuse will increase by 4% over the next year. This would include evidence based alternative events.	<ol style="list-style-type: none"> 1. Financially support community events and activities for youth and families that prevent substance misuse 2. Financially support events that are alternative events for families and youth.

	3. Provide information dissemination about community events that are occurring.
Goal 2 The LCC will work to increase information dissemination regarding prosocial activities that prevent substance abuse by using information sharing between members and creating a social media site to share information with the community. This will be monitored for success using analytics that monitor engagement and tracking attendance at events.	<p>1. Create a system for LCC members and community members to share information regarding community events that prevent substance abuse.</p> <p>2. Share events and information dissemination on social media.</p> <p>3. Monitor engagement as well as analytics and respond accordingly with increased or decreasing postings</p>
Problem Statement #2	Steps
Goal 1 The number of youth and adults seeking treatment and intervention options for substance abuse disorder and co-occurring mental health conditions will increase 5% over the next year	<p>1.Support the provision of increased substance abuse awareness and mental health wellness activities.</p> <p>2. Support and fund treatment and intervention activities as well as activities that connect individuals to treatment and intervention</p> <p>3. Fund justice services that support intervention and treatment for adults that engage in the use of illegal substances..</p>
Goal 2 The LCC will work to increase LCC participation by inviting new and inactive members to meetings. The LCC will encourage collaborations between members and the community to increase referrals by 2% to treatment and resources in the community over the next year.	<p>1.Support current members inviting new individuals to meetings. Encourage reaching out to inactive members.</p> <p>2. Promote community collaboration by supporting and funding programs that include collaborations to prevent or treat substance misuse.</p> <p>3. Promote community collaborations by supporting and funding for programs that increase refer</p>
Problem Statement #3	Steps

<p>Goal 1 The number of youth and adults who participate in evidence-based substance abuse awareness programs/prevention awareness will increase by 6% over the next year.</p>	<ol style="list-style-type: none"> 1. Support and fund evidence-based prevention programming for youth and adults. 2. Support and fund programs that identify at risk youth and youth with other mental health risk factors. 3. Support and fund prevention programs that educate and address the ramifications of substance abuse
<p>Goal 2 The LCC will support programs that increase the amount of controlled or illegal substances seized by law enforcement agencies or anonymously disposed of by community members by 2% over the next year.</p>	<ol style="list-style-type: none"> 1. Support and fund law enforcement efforts to remove controlled substances from the community 2. Support and fund activities such as drug take back day and drug kiosks that promote drug disposal. 3. Support and fund information dissemination regarding the importance of removing controlled and illegal substances in the community.

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		
1	Amount deposited into the County DFC Fund from fees collected last year:	\$7728.75
2	Amount of unused funds from last year that will roll over into this year:	\$7090.37
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$14,819.12
4	Amount of funds granted last year:	\$3795.00
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):	\$125,000.00
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: \$1897.50	Intervention/Treatment: \$ 1897.50	Justice Services: \$
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation		\$ 0
Office supplies		\$ 0
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$ 948.75	Goal 1: \$	Goal 1: \$ 948.75
Goal 2: \$ 948.75	Goal 2: \$	Goal 2: \$ 948.7