

# **Governor's Commission for a Drug Free Indiana**

*A Division of the*

## **Comprehensive Community Plan**

**County: Daviess**

**LCC: Local Coordinating Council for a Drug-free Daviess Co.**

**Date Due: August, 2018**

**Date Submitted:**

**New Plan: X**

**Plan Update:**

**LCC Contact: Terry Cohen, Coordinator**

**Daviess County Commissioners**

**Address: 200 E. Walnut**

**City: Washington Zip Code: 47501**

### **Plan Summary**

**Mission Statement:** The Daviess County LCC believes alcohol, tobacco, or drug abuse (ATOD) to be among the leading health and social problems in our nation today. ATODs negatively affect virtually every member of our society through their impact on crime, families, health, education, employment and economics. We believe an important step toward the eradication of ATOD is to address the problem through the combined efforts of citizens at the community level.

We, the Local Coordinating Council for a Drug-free Daviess County, support the coordination of a community-based comprehensive ATOD network to address the problems associated with these abuses and to promote a healthy life-style.

**History:** The Daviess County LCC has served as an active agency since the early 1990s. It has endeavored to maintain a broad representation of the community. Members of the clergy, school systems, law enforcement, treatment facilities, and interested citizens continue to serve on the Council. Its activity has grown from merely a funding agency to an active participant in substance abuse.

Daviess County is located in the southwest corner of Indiana. This is a rural area, consisting of farms and small communities. This is also a county which continues to address concerns as a fairly economically depressed area. Its county seat is Washington, which is located 100 miles southwest of Indianapolis, 60 miles southwest of Bloomington, 50 miles north of Evansville, and 18 miles east of Vincennes.

Daviess County was 98.1% white. As of 2012, estimates put the white population at 95%. Hispanics are 4.3% of the population. The population has a large number of Amish community members. For 2011, the average household income is estimated to be \$55,256. The estimated per capita income for Daviess County, IN is \$19,455. The estimated per capita income for All of US is \$27,858. Daviess County has the lowest unemployment rate in the state at 6.3%

Daviess County ranks 2<sup>nd</sup> in the state for the percentage of people with less than a 9<sup>th</sup> grade education. Currently, it is estimated that 5.1% of the population in Daviess County, IN has a Graduate or profession degree. 7.2% have a Bachelor's Degree. In comparison, for All of US, it is estimated that 10.5% of the population have a Graduate or profession degree and 18% had earned a Bachelor's Degree.

Besides farming, the primary industry in the area is a Perdue poultry plant, a grain processing plant, and agribusiness companies. The county's identity has long been associated with its large Amish community. The Amish lifestyle and traditions, restaurants, and shops have attracted a certain amount of tourism. There is a fairly sizable group of educated and professional citizens, but there is also a large population of low income people. Recently, there has been a rise in the number of Hispanic families\*.

**Summary of the Comprehensive Community Plan:** The Daviess County LCC monitors its substance abuse related services and programs to evaluate their effectiveness and their responsiveness to the needs of the county residents. Agencies seeking LCC support are required to submit detailed grant applications outlining the purpose of their events or programs, how they will use their funds, and the numbers of people they will serve. Representatives of these agencies are also required to attend the monthly Council meetings and to present written and oral reports of their events/programs. The LCC often serves as an active participant in these events in order to support the efforts of the agencies and as a means to help promote awareness of the dangers of substance abuse.

Problem statements were based on the gaps and needs found through the assessment. Assessment tools included the COPS Methamphetamine Initiative evaluation report 2010, the Epidemiological profile from the Strategic Prevention Framework (SPF)-State Incentive Grant (SIG) Southern Indiana Methamphetamine Alliance (SIMA) project 2011, Community survey conducted January 2010 added information about drug-related services, Daviess County Sheriff, prosecutor and probation information and prevalence statistics from the Indiana Prevention Resource Center.

In considering data and statistics related to Daviess County, risk factors include family and peer/individual. Family risk factors to reflect on are family history of problem behavior, family management problems, family conflict and favorable attitudes and involvement in problem behavior. Peer and individual risk factors include early and persistent antisocial behavior, rebelliousness and favorable attitudes toward problem behaviors. In both cases, partnering agencies who facilitate RARE and Strengthening Families have seen a relationship between these risk factors and the individuals they serve.

## **Membership List**

**County LCC Name:** Local Coordinating Council for a Drug-free Daviess Co.

	Name	Organization	Race	Gender	Category
1	Jennifer Stefancik	Purdue Extension	C	Female	Education
2	Jane Ann Beard	Purdue Extension	C	Female	Education
4	Ellie Meade	Youth First	C	Female	Prevention
5	Carole Luchtefeld	RARE Program	C	Female	Treatment
6	Barbara Knepp	WHS	C	Female	Youth/Prevention
7	Jeff Doyle	Barr-Reeve schools	C	Male	Education
8	Christopher Byars	Good Shepard	C	Male	Faith Based
9	Trent McWilliams	Washington Police Dept.	C	Male	Law Enforcement
10	Kelly Miller	Griffith Elem	C	Female	Education
11	Bill Dougherty	DC Sheriff's Dept	C	Male	Law Enforcement
12	Angie Russell	Samaritan Center	C	Female	Treatment
13	Dan Murrie	DC Prosecutor	C	Male	Judiciary
14	Nicole Cook	North Daviess Schools	C	Female	Education
15	Cindy Barber	Purdue Extension	C	Female	Education
16					
17	Molly Healy	ITPC	C	Female	Treatment
18	Darin Hornaday	YMCA	C	Male	Youth
19	Mark Arnold	WJHS	C	Male	Education
20					
21	Gary Allison	Daviess Co. Sheriff's Dept.	C	Male	Law Enforcement
22	Joy Cassitty	Samaritan Center	C	Female	Treatment

## Problem Identification

**A. Problem Statement #1: Adults, in Daviess County, abuse alcohol, methamphetamine, marijuana and prescription drugs.**

**B. Supportive Data**

1. In 2016 there were 32 alcohol related collisions in Daviess County, up from 20 identified during 2015.
2. Meth lab seizures numbered 2 during 2016, down from 16 during 2015 per the Indiana State police.
3. According to the data available through the report of the SEOW Epidemiological Profile for Indiana **in 2016**, there were 169 total substance abuse treatment episodes during 2016, a decrease from the 252 during 2015. Treatment Episodic Data Sets (TEDS) information is related to individuals entering into substance abuse treatment who are at 200% below the federal poverty level and receive state funded treatment subsidies.
  - 64 (119 previous year) for meth use and 50 (74) for meth dependence.
  - 62 (111) for marijuana use and 35 (50) for marijuana dependence.
  - 47 (102) for prescription drug abuse and 19 (38) for prescription drug dependence.
  - 32 for opiod abuse and 17 for opiod dependence

- 71 (94) for alcohol use and 51 (63) for alcohol dependence.
- 4. Indiana State Excise Police conducted 59 alcohol sales compliance checks with 4 failures reported during 2016.
- 5. The Daviess County Sheriff's Department identified 122 adults as operating a vehicle while intoxicated. (Uniform Crime Report, 2014). The Sheriff's Department reported 55 OVWI during 2016.
- 6. DC Sheriff Department 93 adults with drug possession during 2016.
- 7. The Daviess County Probation Department identified 139 (121 in 2013) adults convicted of substance abuse offenses and placed on Probation during 2015.
- 8. The Washington Police Department had the following arrests with charges during 2016:
  - 118 – possession of marijuana, synthetic marijuana possession, dealing in marijuana (116 the previous year)
  - 49 – possession or manufacturing of methamphetamine (62 the previous year)
  - 31 – possession of drug (38 the previous year)

### **End of Year 1 Update:**

### **Year 2 Update:**

### **Final Update (end of Year 3):**

## **Goals:**

1. Lower the alcohol, methamphetamine, marijuana and prescription drug indicators such as arrests records and treatment numbers.

### **End of Year 1 Annual Benchmarks:**

### **End of Year 2 Annual Benchmarks:**

## **Final Report (end of Year 3):**

### **D. Objectives:**

- 1) Support prevention and education initiatives by providing Prevention and education programming opportunities that increases awareness of alcohol and drug issues, including awareness information for parents and caregivers, school personnel, community key leaders and the county population in general
- 2) Support intervention and treatment initiatives by providing opportunities for awareness and education about treatment options. Funding will allow for the support and increase of the availability of substance abuse treatment and intervention services, including staff training related to the assessment and need for treatment practices and counseling support.
- 3) Support judicial and law enforcement initiatives by providing resources for programs through grant allocations that help reduce repeat offender rates for alcohol and drug related sentences. Support law enforcement through maintenance and refinement of equipment used to take into custody offenders who have alcohol or drug abuse as a primary or secondary reason for arrest.
- 4) Support and fund programs that build adult life skills and directly address risk factors for alcohol and drug abuse. Resources for projects that reduce the number of crimes associated with alcohol and drug abuse processed through the judicial system and sources that will help decrease of the Alcohol and drug priority scores.

### **End of Year 1 Update:**

### **End of Year 2 Update:**

### **End of Year 3 Update:**

**Problem Statement #2: Those under 18 (youth) abuse substances including, but not limited to, alcohol, tobacco, and marijuana.**

#### **B. Supportive Data:**

1. Samaritan Center provided substance abuse treatment for 6 youths during 2015.

Data: Indiana State Epidemiological Report, 2016:

2. Percentage of 12<sup>th</sup> grade Indiana Students, Southwest Region, reporting monthly use of cigarettes is 16.6%. Indiana State average is 14.9%
3. Percentage of 12<sup>th</sup> grade Indiana Students, Southwest Region, reporting monthly

use of marijuana is 14.3%. Indiana State average is 20.3%

4. Percentage of 12<sup>th</sup> grade Indiana Students, Southwest Region, reporting monthly use and binging of alcohol is 35.7%. Indiana State average is 34.6%
5. The Washington Police Department processed 27 youth charges for alcohol or drug related issues during 2016, compared to 39 during 2015. During 2016, a total of 5 youths were arrested for marijuana related charges and 7 youths were arrested for alcohol related charges. This decreased from the 11 marijuana charges in 2015 and decreased from the 15 alcohol charges in 2015.

### **End of Year 1**

### **End of Year 2 Update:**

### **Final Update (end of Year 3):**

### **C. Goals:**

- 1) Reduce 30 day use of alcohol, marijuana, and tobacco among those less than 18 years of age.
- 2) Decrease the number of youth processed through the judicial system.

### **End of Year 1 Annual Benchmarks:**

### **End of Year 2 Annual Benchmarks:**

### **Final Report (end of Year 3):**

### **D. Objectives:**

1. Support prevention programming by increasing opportunities for increasing opportunities for education and awareness by providing assistance to community advocates to promote after-school functions, supporting in-school clubs and school-wide prevention initiatives and after-school evidence based prevention programs that address peer and family risk factors.
2. Provide supports to help sustain school based prevention programs like red ribbon week and other education and awareness oriented programming.
3. Support in-school evidence-based prevention programming. These projects may have many interventions which can include drug testing and drug dog use as long as they are a component of a larger prevention initiative.

4. Support intervention and treatment initiatives by promoting opportunities for youth treatment programs. This would include programs that build youth life skills and directly address risk factors for substance use.

**End of Year 1 Update:**

End of Year 2 Update:

**Final Update (end of Year 3):**

**Next Annual Update Due: August, 2019**

**Next Comprehensive Community Plan Due: August, 2021**

**Date of Community Consultant Review:**

**Disclaimer:**

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

**Terms and Conditions:**

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6- 16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6-16.

**Initials: TC**