

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Johnson

LCC Name: Drug Free Johnson County

LCC Contact: Michelle McMahon

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City: Franklin

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County Commissioners: Brian Baird, Kevin Walls, Ron West

Address: 86 W. Court Street

City: Franklin

Zip Code: 46131

Vision Statement

We envision a healthy community with cohesive relationships between stakeholders to decrease substance use related problems.

Mission Statement

Drug Free Johnson County (DFJC) is a volunteer organization dedicated to serving as a catalyst for preventing, treating, and reducing the negative effects of substance abuse by youth and adults in Johnson County.

#	Name	Organization	Race	Gender	Category
1	Sonya Ware-Meguair	Girls Inc of Johnson County	Caucasion	Female	Prevention/Education
2	Kendee Kolp	Reach For Youth	Caucasion	Female	Treatment/Intervention
3	Tammi Hickman	Johnson County CASA	Caucasion	Female	Youth Services
4	Aaron Hagist	Greenwood PD	Caucasion	Male	Justice/Law Enforcement
5	Dawn LaPlante	Upstream Prevention	Caucasion	Female	Prevention/Education
6	Ross Stackhouse	HeavenEarth Church	Caucasion	Male	Religious; Treatment/Intervention
7	Dustin Burton	Greenwood Probation	Caucasion	Male	Justice/Law Enforcement
8	Keri Lyn Powers	Hickory Recovery	Caucasion	Female	Treatment/Intervention
9	Susan Sahn	Boys & Girls Club of Johnson County	Caucasion	Female	Prevention/Education
10	Michele Lee	Turning Point Domestic Violence Services	Caucasion	Female	Prevention/Education; Treatment/Intervention
11	Tina Snider	Tara Treatment Center	Caucasion	Female	Treatment/Intervention
12	Kody Martin	Franklin PD	Caucasion	Male	Justice/Law Enforcement
13	Katie Krukemeier	Johnson County	Caucasion	Female	Treatment/Intervention

		Juvenile Probation			
14	Aubrey Buchanan	Boys & Girls Club of Johnson County	Caucasion	Female	Prevention/Education
15	Talia Adkins	Whiteland Police Department	Caucausion	Female	Justice/Law Enforcement
16	Janna Mally	George JR Republic in Indiana	Caucasion	Female	Treatment/Intervention

LCC Meeting Schedule:

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

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: Johnson

County Population: 164,298 (US Census Bureau, 2021)

Schools in the community: Center Grove Community School Corp., Clark-Pleasant School Corp., Edinburgh Community School Corp., Franklin Community School Corp., Greenwood Community School Corp., Nineveh-Hensley Jackson School Corp., Our Lady of Greenwood, St. Rose of Lima, Greenwood Christian Academy, St. Francis & Claire

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

Johnson Memorial Health, Community Health Network South Hospital, Windrose, Franciscan Alliance, St. Thomas Health Clinic, American Health Network, Adult & Child

<p>Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)</p> <p>Adult & Child, Centerstone, Reach for Youth, Assist, George Jr. Republic, Valle Vista, School Counselors, New Outlook Counseling, Kenosis Counseling, Jane Pauley Center, Tara Treatment (substance use), Groups Recover Together, Otis T. Bowen Center, Mental Health America of Indiana, Landmark Recovery (substance use), Hickory Recovery (substance use), Ethan Crossing of Indianapolis, and other Local Private Practices</p>
<p>Service agencies/organizations</p> <p>Upstream Prevention (including Empower Johnson County), Reach For Youth, Girls Inc. of Johnson County, Boys and Girls Clubs of Johnson County, United Way of Johnson County, Johnson County Community Foundation, Systems of Care, Turning Point Domestic Violence Services, Recover Out Loud, Firefly Children & Family Alliance, and others</p>
<p>Local media outlets that reach the community</p> <p>Daily Journal, KORN County Radio, Indy Star, Southside Times, South Magazine, Center Grove Icon Magazine, The Courier Newspaper, Social Media, Franklin College Newspaper</p>
<p>What are the substances that are most problematic in your community?</p> <p>Heroin/Opiates, Marijuana, Methamphetamine, Alcohol, Nicotine, Cocaine, Prescription Drugs, Synthetics, Acid, Psilocybin Mushrooms</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community</p> <p>Above providers, plus school-based activities and programs. Homeschool Educators Group, Recovery Church: HeavenEarth Church, Reformers Unanimous Meetings: Greenwood Bible Baptist Church, Cornerstone Church/The Lord's Locker, Fellowship Baptist Church, Celebrate Recovery Meetings: Grace Assembly of God and Emmanuel Church of Greenwood Campus Fieldhouse, 12-Step: Grace United Methodist Franklin, Overdose Fatality Review Team, Naloxbox, and Recover Out Loud, Tara Treatment IOP</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. Acceptable community norms of substance use	1. Community organizations that address use (DFJC, Empower, etc.) 2. Schools promoting non-use messaging 3. Data availability on community and youth perception	1. Trained doctors/others aware of prevention approaches 2. Employers need workers, and may/have relaxed screenings 3. Lack of ability for law enforcement to consistently enforce alcohol violations
2. Low perception of harm of substance use	1. Community organizations that address use (DFJC, Empower, etc.) 2. School resource officers interested in supporting prevention efforts 3. Data availability on community and youth perception	1. Lack of prevention/awareness programs for adults related to adult misuse/abuse 2. Lack of reach to those who dabble, but are not yet addicted 3. Lack of factual information sharing
3. Mental health challenges (self-medication/coping)	1. Intensive outpatient counseling for youth 2. 12 Step meetings 3. Residential and outpatient treatment 4. Suicide Prevention Coalition of Johnson County	1. Have mental health counseling resources in the County, but a large deficit in provider to population ratio 2. No juvenile/youth NA meetings 3. Not enough trauma-informed care, trainings, and referrals
Protective Factors	Resources/Assets	Limitations/Gaps

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

<p>1. Community capacity to address problems</p>	<p>1. School resource officers interested in supporting prevention efforts</p> <p>2. Prosecutor willing to prosecute/increase enforcement</p> <p>3. Free Narcan</p>	<p>1. Lack of transportation for adults to resources, or childcare while utilizing</p> <p>2. Lack of consistent enforcement related to alcohol</p> <p>3. Lack of treatment available (for the right ages, right type, at the right time)</p> <p>4. Lack of case management agents/direct services</p>
<p>2. Social connectedness</p>	<p>1. Religious/community-based organizations focused on increasing connection</p> <p>2. Director of Mental Health in school (and similar positions)</p> <p>3. Increase in focus (in community) on positive mental health/connection</p>	<p>1. Schools expected to do too much, and don't have the mental health/treatment/prevention support capacity</p> <p>2. Lack of holistic approach to problems (involving family and immediate supports)</p> <p>3. Uneven knowledge/connection to community resources for the entire population</p>
<p>3. Education (of substances and problems)</p>	<p>1. Existing efforts in schools to provide education to youth, including peer-to-peer education</p> <p>2. Community organizations that address use (DFJC, Empower, etc.)</p> <p>3. School resource officers interested in supporting prevention efforts</p>	<p>1. Community awareness of problems (need more), but not of resources</p> <p>2. Lack of education (outside of tobacco and nicotine)</p> <p>3. Lack of concern</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. Acceptable community norms of substance use	1. Youth perceive high rates of peer use. 2. Adults approve of other adult recreational use of substances. 3. Law enforcement lacks community support for enforcement of substance use infractions.
2. Low perception of harm of substance use	1. Youth in Johnson County misuse/abuse/use alcohol, nicotine, and marijuana because of a low perception of harm. 2. Adults use illicit drugs and abuse alcohol because of a low perception of harm. 3. Law enforcement is unable to focus on alcohol enforcement because of competing priorities.
3. Community capacity to address problems	1. Lack of comprehensive, evidence-based prevention programming for youth and adults. 2. Lack of treatment access for substance use disorders. 3. Substance abuse is a significant contributor to crime and crises in Johnson County.

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. Youth in Johnson County misuse/abuse/use	Alcohol – Past 30 Days 3.2% 6 th Grade	Indiana Youth Survey, Region 10 (Bartholomew, Brown, Dearborn,

<p>alcohol, nicotine, and marijuana.</p>	<p>7.1% 8th Grade 12.8% 10th Grade 16.8% 12th Grade</p> <p>Marijuana – Past 30 Days .8% 6th Grade 3.7% 8th Grade 7.1% 10th Grade 7.7% 12th Grade</p> <p>Cigarettes – Past 30 Days 1.1% 6th Grade 1.7% 8th Grade 1.8% 10th Grade 2.4% 12th Grade</p> <p>EVPs – Past 30 Days 7.1% 8th Grade 10.1% 10th Grade 10.9% 12th Grade</p> <p>Mental Health: Felt sad two or more weeks in a row: 35.2% 6th Grade 35.4% 8th Grade 37.8% 10th Grade 36.8% 12th Grade</p> <p>Considered attempting suicide: 12.9% 6th Grade 17.3% 8th Grade 18.1% 10th Grade 16.0% 12th Grade</p> <p>Made a plan for attempting suicide: 10.2% 6th Grade 13.2% 8th Grade 13.7% 10th Grade 11.0% 12th Grade</p>	<p>Decatur, Fayette, Franklin, Johnson, Ohio, Ripley, Rush, Shelby, Union (2022)</p> <p>https://inys.indiana.edu/docs/survey/indianaYouthSurvey_2022.pdf</p>
<p>2. Lower reported quality of life, and poor mental health are contributors to adults use of illicit drugs and alcohol abuse.</p>	<p>195 Treatment Episodes</p> <p>RX Opioid Misuse 45 of 195 (23.1%) RX Opioid Dependence 18 of 195 (9.2%)</p> <p>Heroin Use 58 of 195 (29.7%) Heroin Dependence</p>	<p>State Epidemiological Outcomes Workgroup (2021-2022) (Johnson County)</p>

	<p>44 of 195 (22.6%)</p> <p>Alcohol Misuse 85 of 195 (43.6%) Alcohol Dependence 58 of 195 (29.7%)</p> <p>Marijuana Use 76 of 195 (39%) Marijuana Dependence 23 of 195 (11.8%)</p> <p>Meth Use 70 of 195 (35.9%) Meth Dependence 42 of 195 (21.5%)</p> <p>19% of Johnson County adults reported binge or heavy drinking.</p> <p>Johnson County ranks 6 of 92 in Indiana Counties in quality of life.</p> <p>Ratio of Population to Mental Health Providers (Includes providers that treat alcohol and other drug abuse) 1,000:1 Johnson County 560:1 Indiana</p> <p>14 % of Johnson County adults reported frequent mental distress. (4.6 or more days of poor mental health in a month).</p>	<p>CountyHealthRankings.org (2022)</p> <p>State Epidemiological Outcomes Workgroup (2021-2022)</p>
<p>3. Substance abuse is a significant contributor to crime and crises in Johnson County.</p>	<p>75 alcohol-related collisions in Johnson County (SEOW, 2021-2022)</p> <p>Johnson County death by suicide 11.8 per 100,000</p> <p>Johnson County average number of mentally unhealthy days reported in the past 30 days-4.6</p>	<p>State Epidemiological Outcomes Workgroup (2021-2022)</p> <p>Johnson County Community Corrections Data (2022)</p>

	<p>Total drug and alcohol arrests for the Johnson County in 2022: 1,512</p> <p>5852 screens conducted; 404 of which were positive (6.9%)</p> <p>Of the positive screens: Alcohol 22%; Marijuana 21.5%; Opiates/Fentanyl/ Buprenorphine 12.4%; Methamphetamine 9%</p> <p>Adult & Juvenile Probation Data:</p> <p>Adult Total Screens: 2,995 Positive: 426 positive (14%) Of the positive screens: 56% Marijuana; 27% Methampetamines; 10% Opiates/Fentanyl</p> <p>Juvenile Total Screens: 629 Positive: 320 (51%) Of the positive screens: 92.5% Marijuana; 7.5% Alcohol; 3.1% Methamphetamine; 1.8% Fentanyl</p>	<p>Johnson County Sheriff's Department County-Wide Data</p> <p>Johnson County Adult & Juvenile Probation Data (2022)</p>
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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. Youth in Johnson County misuse/abuse/use alcohol, nicotine, and marijuana.</p>	<p>1. Increase support and awareness of organizations that address these issues.</p> <p>2. Support schools and community based organizations in their prevention programming.</p> <p>3. Increase ability of law enforcement to address alcohol violations.</p>

<p>2. Lower reported quality of life, and poor mental health are contributors to adults use of illicit drugs and alcohol abuse.</p>	<ol style="list-style-type: none"> 1. Increase prevention programming and awareness aimed at adults. 2. Increase programming and access to care to individuals who use substances. 3. Increase factual information sharing in the community.
<p>3. Substance abuse is a significant contributor to crime and crises in Johnson County.</p>	<ol style="list-style-type: none"> 1. Provide supportive resources for schools, school resource officers, and community based organizations. 2. Encourage enforcement of substance use infractions. 3. Increase ability for law enforcement to enforce drug-related infractions.

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.

<p>Problem Statement #1</p>
<p>Goal 1: Reduce substance use by middle school youth, for each substance, by 1% point as measured by the Indiana Youth Survey (Region 10) by 2025.</p>
<p>Goal 2: Reduce substance use by high school youth, for each substance, by 1% point as measured by the Indiana Youth Survey (Region 10) by 2025.</p>
<p>Problem Statement #2</p>
<p>Goal 1: Increase treatment episodes by 3% from the 2020 baseline (195 episodes), as measured by the Treatment Episode Dataset data available through the State Epidemiological Outcomes Workgroup state report, by 2025.</p>
<p>Goal 2: Reduce the average number of mentally unhealthy days, by reducing the percent of adults in frequent mental distress by 1% (from a baseline of 14%), by the Treatment Episode Dataset data available through the State Epidemiological Outcomes Workgroup state report, by 2025.</p>
<p>Problem Statement #3</p>

Goal 1: Increase enforcement of alcohol and drug related offenses by 1% by 2025, as measured by the number of substance related arrests, through support of local law enforcement agencies efforts.

Goal 2: Decrease positive drug screen results of adults & juveniles placed on probation in Johnson County by 1% by 2025, as measured by Johnson County Probation Departments.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
<p>Goal 1: Reduce substance use by middle school youth, for each substance, by 1% point as measured by the Indiana Youth Survey (Region 10) by 2025.</p>	<ol style="list-style-type: none"> 1. Theory-based/research informed programs for youth to decrease use of substances. 2. Provide support for substance-free alternatives activities for youth. 3. Provide resources and tools to providers to aid in the treatment of substance abuse.
<p>Goal 2: Reduce substance use by high school youth, for each substance, by 1% point as measured by the Indiana Youth Survey (Region 10) by 2025.</p>	<ol style="list-style-type: none"> 1. Theory-based/research informed programs for youth to decrease use of substances. 2. Provide support for substance-free alternatives activities for youth. 3. Provide resources and tools to providers to aid in the treatment of substance abuse.
Problem Statement #2	Steps
<p>Goal 1: Increase treatment episodes by 3% from the 2021-2022 baseline (195 episodes), as measured by the Treatment Episode Dataset data available through the State Epidemiological Outcomes Workgroup state report, by 2025.</p>	<ol style="list-style-type: none"> 1. Reduce barriers for adults to reduce their use and move towards recovery. 2. Provide information to the community to increase awareness for local resources. 3. Theory-based/research-informed programs for adults to decrease use of substances.

	4. Provide resources and tools to providers to aid in the treatment of substance abuse.
Goal 2: Reduce the average number of mentally unhealthy days, by reducing the percent of adults in frequent mental distress by 1% (from a baseline of 14%), by the Treatment Episode Dataset data available through the State Epidemiological Outcomes Workgroup state report, by 2025.	<ol style="list-style-type: none"> 1. Reduce barriers for adults to increase access to care for behavioral health. 2. Provide information to the community to increase awareness for local resources. 3. Theory-based/research-informed programs for adults to decrease unhealthy days.
Problem Statement #3	Steps
Goal 1: Increase enforcement of alcohol and drug related offenses by 1% by 2025, as measured by the number of substance related arrests, through support of local law enforcement agencies efforts.	<ol style="list-style-type: none"> 1. Provide resources and tools to law enforcement to aid in the enforcement of substance-related crimes. 2. Increase positive community engagement with law enforcement entities to reduce substance related crimes. 3. Increase positive relationships and engagement between law enforcement and the court system.
Goal 2: Decrease positive drug screen results of adults & juveniles placed on probation in Johnson County by 1% by 2025, as measured by Johnson County Probation Departments.	<ol style="list-style-type: none"> 1. Provide resources and tools to law enforcement to aid in the enforcement of drug-related crimes. 2. Provide resources and tools to offenders (while in jail) to decrease recidivism when released.

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:	\$114,745.95
2	Amount of unused funds from last year that will roll over into this year:	\$1,064.67
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$115,810.62
4	Amount of funds granted last year:	\$125,100.50
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: \$29,000.00	Intervention/Treatment: \$29,000.00	Justice Services: \$28,999.95
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation		\$26,796.00
Other/Operating Supplies		\$2,014.67
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$19,018.00	Goal 1: \$13,113.00	Goal 1: \$7,105.95
Goal 2: \$30,718.00	Goal 2: \$5,363.00	Goal 2: \$11,682.00