

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



*Behavioral Health Division*

## **Comprehensive Community Plan 2021**

County: Porter

LCC Name: Porter County Substance Abuse Council

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City: Valparaiso

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## **Vision Statement**

What is your Local Coordinating Council's vision statement?

Proving sustainable initiatives and resources to end substance use disorder in Porter County.

## **Mission Statement**

What is your Local Coordinating Council's mission statement?

Community hub responsible for building capacity, creating sustainability and providing resources to enhance the quality of life in Porter County by reducing substance use and the underlying causes and unintended consequences.



**LCC Meeting Schedule:**

Please provide the months the LCC meets throughout the year:  
January through November

January, February, March, April, May, June, July, August, September, October, November and December. We meet the 2<sup>nd</sup> Thursday of every month. December is the award and recognition ceremony. The meeting was in person.

**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**

Porter County, Indiana

**County Population**

According to the U.S. Census Bureau 2019, the estimated population in Porter County was **170,389**, which included 50.4% female. The gender distribution is similar to the state. The population size was increased by **3.7%** between 2010 and 2019.

The demographic distributions of Porter County are different from the state. The major population is Caucasian alone, which occupied 91.9% of the entire population. The second-largest population in Porter County in 2019 was Hispanic Latino at 10.4%. The third-largest population in Porter County in 2019 was African American at 4.4% (U.S. Census Bureau, 2019).

**Schools:**

Duneland School Corporation, East Porter County School Corporation, MSD/Boone Township, Portage Township School Corp., Porter Township School Corp., Union Township School Corp., and Valparaiso Community School Corp.

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

Porter Regional Hospital, North Shore, Healthlinc, Franciscan Alliance

**Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)**

Porter Regional Hospital, Porter-Starke, Inc., North Shore, Healthlinc, Mental Health America, Franciscan Behavioral Health, Regional Mental Health, Heartland Recovery, Recovery Works, Midwest Center for Youth & Families, Hillman Psychological Service, Park Dale, Midwest American Psychological & Counseling Services



**Service agencies/organizations:**

Family Youth Service Bureau, Care Counseling, Mental Health America, Recovery Connection, Family Focus, Family Youth Service Bureau, Family House, Portage Recovery Association, Samaritan Counseling Center, Inc, Lark's Nest Family Counseling Center, Place Counseling, Diann Bins Counseling, Sankofa Counseling, New Beginnings Counseling, To Be Light Ministries, Beyond Boundaries, INTreatment, Therapy Works, Focus Counseling, Wells Family Counseling, Duneland Counseling Center, The Joshua Center of Valparaiso, Family Concern Counseling, Innovative Counseling, Fresh Start, Choices! Counseling, Moraine House, Respite House, Alice's House, Women's Recovery Home, Recovery Works, Family House, Frontline Foundations, Healthy Kids, Greater Good, Tobacco Coalition, Be Safe, WVLP, Boys and Girls Club, Big Brothers/Big Sisters, YWCA, PACT, Intrepid Phoenix, Purdue University Northwest, Indiana University Northwest, Ivy Tech Community College, New Creations, Housing Opportunities, Caring Place, Community Foundation, Healthline, United Way

**Local media outlets that reach the community:**

Matters of Substance Podcast, Porter Life, WVLP, NWI Times, Chesterton Tribune, Post Tribune, The Chronicle, Lakeshore Public TV/Radio, all Chicago media, all Adams Radio stations

**What are the substances that are most problematic in your community?**

Heroin/Opioids, Tobacco/Vaping, Marijuana, Alcohol-underage drinking, Methamphetamine and Cocaine emerging

**List all substance use/misuse services/activities/programs presently taking place in the community**

Sticker Shock, Overdose Lifeline, Above the Influence, Marijuana/Heroin/Opioid/Alcohol Town Halls, Matters of Substance Podcast, #NotAMinorProblem, Mental Health Awareness Training, Youth Mentoring Training, Wake Up Call, Parents Who Host, Real Media, Peer Mentoring, Recovery Support, Teen BEAT, SMART Recovery, Life Skills, Strengthening Families, Around the Table, AA, NA, Circle of Support, Beyond the Influence, WVLP Radio weekly programming, ADD, random drug testing at schools, drug tests available to parents, Deterra pouches available and Narcan available at PCSAC and Health Department, Family Preservation, Father Engagement, Positive Tickets, Coffee with a Cop, TiRosc, Positive Approach to Teen Health



## 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
Low perception of harm for Marijuana, tobacco CBD, vaping related juices and devices because of marketing to youth, social norming and generational use.	The Council has created messaging for the consequences of using Marijuana, cannabinoids and nicotine. Multiple campaigns have been developed and are circulated throughout all 7 of the school corporations along with presentations at middle and high school events, website promotion, billboard and radio campaigns. The Matters of Substance podcast also discusses these topics in detail with special guests throughout the year.	Overcoming messaging challenges from powerhouse Marijuana and tobacco industry, limited budget for marketing and promotion; challenges also from promoting message to youth through social media
Youth and adults are exposed to pro-Marijuana promotion and marketing tactics in an effort to legalize recreational sales. The fact that neighboring states Illinois and Michigan are have legalized Marijuana compounds the problem and increases the likelihood of individual use and normalizing the behavior.	A 12-sector approach to disseminating information throughout the community, community town hall meetings, funding earmarked for marketing and promotion, youth council participates in peer-to-peer engagement, active and engaged coalition agencies	Priority is COVID related messaging. Competing for macro-media opportunities
Nicotine and vaping have a perceived low perception of harm and high level of parental acceptance.	The Council has a partnership	Teachers/schools have limited influence on students; Council provides evidence-based robust programming at no cost to schools, however, sporadic use because of state teaching mandates
Youth do not feel a sense of		Only one out of seven schools have a dedicated substance use prevention teacher. Other schools have strategies

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



<p>belonging in their community because of the transient nature of society and the absence of stability, long term friendships, family and neighbors.</p>	<p>with the school resource officers in middle and high schools to minimize the low attachment risk by rewarding the youth for positive contributions to their school community.</p> <p>Additionally, this strategy builds a student-law enforcement positive relationship. The strategy is supported by the Council and is an evidence-based program called “Positive Ticketing”</p> <p>The Drunk Driving Task Force has created partnerships with local coffee shops and national McDonald’s throughout the county to promote goodwill and build community relationships with the residents</p>	<p>introduced in health class or gym on an infrequent and unpredictable schedule</p> <p>Porter County has a vocal legislative supporter of legalization of Marijuana that has been on (her) agenda for the last decade and continues to reintroduce bills at the state level</p> <p>Limited participation at events</p>
<p>Youth report a low perception of harm with consideration for heroin/opioids, schedule 1-5 drugs/chemicals, Marijuana, and underage drinking</p> <p>Intergenerational substance use increases youth experimentation and drug use</p> <p>Adult and youth with undiagnosed mental health issues go untreated and lead to self-medication and potential drug addiction</p>	<p>Targeted messaging campaigns for students, parents and schools. Prepared social media campaigns with prevention message, peer-to-peer group facilitation, youth council initiatives, youth leadership opportunities</p> <p>Matters of Substance podcast discussions geared toward parents, community and youth. Youth developed podcasts and PSA’s for peer-to-peer discussions</p> <p>Training mentors, support of Mentors as role models</p> <p>Mentor/mentee relationship through the Council’s Youth Mentoring initiative</p> <p>Fully trained and certified staff provide training and resources to community, provide Overdose Lifeline program to all school corporations, Real Media, Parents that Host, Take Back Day, INSPECT, MHFA</p>	<p>Treatment and recovery efforts are resisted because of shame and judgement. Matters of Substance podcast and WVLP radio broadcast success stories, prevention topics, suicide, anti-bullying messages and stigma discussions to provide information to listeners for acceptance and action on a weekly basis. COVID-19 messaging is prevalent, however, substance use is seen as a possible unintended consequence of the pandemic</p> <p>Although training is provided (with CEU’s or certification) on a variety of topics, unless there is a WIFM motivation, then attendance is low</p> <p>Agencies continue to work in “silos” and resist participating in a community forum. Community agencies attack each other during open discussion for</p>



	<p>Council provides drug tests to parents to test their child if suspicious or to set a baseline</p> <p>Council funds community agencies to provide direct programming and strategies to youth; mental health training and programs</p> <p>Funding to address youth substance use and provide tactics to reduce the perception of low harm as related to substance use</p> <p>Mental health training (MHFA) Provide programs and initiatives that reduce the supply and availability of drugs such as INSPECT, Take Back Day, and harm reduction such as needle collection program</p>	<p>not doing enough</p> <p>High levels of community funding results in a flooded service market where agencies are competing for participants to fulfill grant requirements. Duplication of services likely</p>
<p>Data indicates the community norm supports underage drinking for celebratory milestones such as graduation, prom, homecoming and athletic achievements</p> <p>Parents acceptance of underage drinking and feel they have the responsibility to monitor the behaviors. Parental monitoring is perceived as safe parenting.</p> <p>Low perception of harm for long term consequences of underage drinking</p>	<p>The Council has developed a marketing campaign to identify the consequences of underage drinking. The campaign airs on local radio and is a mainstay on WVLP - PSA's as well as Matters of Substance podcast. The marketing materials are available to interested agencies and community organizations for distribution. Programs such Parents Who Host is promoted through the Sticker Shock initiative and distributed to 72,000 people a year through a messaging campaign</p> <p>The Council has developed a billboard to address underage drinking and hosting alcohol party for minors. Drunk Driving Task Force host prevention car simulation classes before each student milestone event to promote wellness and</p>	<p>Parent education is key to reducing underage drinking. Additional resources to be developed aimed toward the adult as role model.</p> <p>Youth mentoring opportunities are limited. Youth mentoring to include substance use module and mental health training for the adult mentor. However, a pilot project is currently underway</p> <p>Challenge to target social media and broadcast platforms with extensive and no exhaustive programming choices. It is a challenge to pinpoint a medium for the broadest mass appeal and consideration</p>



	<p>safety protocols.</p> <p>Coalition members and community agencies are trained to identify mental health issues and provide referrals. Mental Health First Aid, QSP, and SBIRT, suicide prevention training is available to schools, law enforcement, first responders, educators and community members to identify and intervene with mental health and substance abuse issues</p> <p>Staff are encouraged to seek the Certified Prevention Specialist designation. 2 staff have been awarded the designation. All staff are working toward the goal of receiving the designation</p>	
Protective Factors	Resources/Assets	Limitations/Gaps
<p>Highly rated quality of life indicators &amp; economic viability. Median income \$74,064 ; poverty rate is 8.1% and is under the Indiana state average of 11.9%; life expectancy is age 80.8 for females and 76.7 for males; In 2019, 93.1% of people with a high school diploma or higher and 28.2% of people earned a bachelor or higher degree, which is higher than Indiana.</p> <p>Porter County maintained the highest level of personal income in Northwest Indiana for a 14-year period.</p> <p>Access to mental health and preventive medicine. Only</p>	<p>The Council is the acting hub of substance related activities and provides expert training, credentialing, continuing education, resources and support to agencies and the community at no cost</p> <p>The Tobacco Education and Prevention Coalition provides strategies to reduce tobacco and vaping behaviors at no cost. The Council is an active member of the coalition. The community supports the no smoking initiative throughout the county to include but not limited to government buildings, healthcare facilities, police agencies and school campuses.</p> <p>Elected county officials are committed to restricting the legalization of Marijuana under this administration. Additionally, nicotine and</p>	<p>The COVID-19 pandemic will create new challenges and an expected increase in substance use and relapses in recovery.</p> <p>In 2020, unemployment has risen, which was higher than Indiana state [Porter County: 4.2; Indiana [4]] due to the pandemic and unintended consequences will take time to gauge and extended reaction time</p> <p>Although mental health and substance use disorder programs and strategies are available, attendance is generally low</p> <p>There are community gathering places throughout the county to</p>



<p>7.9% (under age 65 years old ) of the population are uninsured</p> <p>Community involvement and active in promoting health behaviors and supporting substance use reduction initiatives</p> <p>Agencies partner to provide resources to increase mental health initiatives and reduce substance use</p>	<p>vaping juices as well as devices are restricted from youth purchase. Identification is required and Excise compliance checks in District 1 are frequent and check for underage sales of alcohol, tobacco/vape products and synthetic cannabinoids</p> <p>School campuses have zero tolerance for substance possession and/use while on school property. Consequences are listed in the policy and procedure manual.</p> <p>School resource officers are stationed at campuses throughout the day and available for consultation and procuring safe environments that promote learning</p>	<p>recreate but lack of transportation limits uses by those in lower income bracket 7.9 % of the uninsured have limited healthcare choices</p> <p>Teachers and school personnel need to be regularly tested for substance use</p>
<p>Robust community engagement and agencies that support prevention, treatment, recovery and judicial efforts</p> <p>Mental health and substance use disorder are a community priority. Agencies provide a range of options for personal care to accommodate varied household incomes</p> <p>Recovery efforts are supported by the community</p>	<p>Agencies and organizations offer programs and services to detour substance use disorder and reduce impaired driving. Law enforcement agencies and the Drunk Driving Task Force partner with schools and MADD/SADD to promote safe driving. Impaired driving simulation obstacles and school field days are offered during prom/graduation/homecoming</p> <p>Community agencies and churches form partnerships to house the homeless and those with mental and substance abuse issues.</p> <p>Prosecutor's Office work with law enforcement to prosecute and convict impaired drivers to the fullest extent of the law. Offender rehabilitation is the goal to keep the public safe</p>	<p>Data indicates that stigma and the misconceptions that support it prevent those in recovery from fully integrating into the community.</p> <p>Porter County residents struggling with substance dependence often times still face the negative stigma and shame associated with addiction. This may prevent them from fully integrating back into society.</p> <p>Lack of insurance, funding avenues, and/or available openings at facilities make inpatient substance abuse/detox treatment within Porter County, and other surrounding counties, a challenge at times.</p> <p>Porter County doesn't have a dedicated detox facility and referral are to Lake County, downstate or out of state</p> <p>A large number of O-P treatment</p>



	<p>Community leadership promotes and supports recovery initiatives. Recovery resources are available for those seeking help. AA, NA, SMART recovery and faith-based alternatives are offered for adults and youth to achieve long term sobriety.</p> <p>Recovery outreach throughout the state are on the upswing. Indiana Recovery Network/Mental Health America Indiana provide monthly meetings and webinars to LCC's. Indiana Addictions Coalition, Indiana Assoc. of Peer Recovery and Next Level Recovery provide structure and support to LCC's and local agencies</p>	<p>facilities from other states are locating in the county. It is challenging to vet the facilities in an effort to make referrals or not</p> <p>There are limited recovery houses available for female and male residents; however, community agencies work together to house and shelter those in active addiction as well as those in recovery.</p> <p>Recovery options are still limited but Recovery Connection is building capacity to function as the hub of recovery in Valparaiso for adults and teens</p> <p>The homeless shelters were ordered to vacate during the COVID-19 pandemic and are still under orders to limit capacity</p> <p>Certain populations are reluctant to seek help. Aged, LGBTQ+, LatinX populations are reluctant to join the coalition</p>
Appropriate structure such as limits, rules, monitoring, and predictability	<p>A strong mental health and faith-based community is invested in preventive measures, treatment modalities such as medication assisted treatment, recovery and recovery support</p> <p>First Responders are trained to respond to overdose events with Naloxone and refer to treatment for rehabilitation. In some instances the Council assumes 3<sup>rd</sup> party pay responsibility under presumptive eligibility guidelines to expedite healthcare</p> <p>The Council acts as the community hub for networking,</p>	<p>Wait times to initiate therapeutic intervention for both mental health and substance treatment can be lengthy at times. Some waiting lists for at least 30 days</p> <p>Parents don't seek help for their children because of stigma</p> <p>Parents aren't able to identify substance use in the experimental stage until it becomes an addiction</p>



	training, and planning substance use prevention, treatment and recovery strategies with a multitude of agencies	
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## **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.*

<b>Risk Factors</b>	<b>Problem Statement(s)</b>
Porter County residents, youth and adult, are exposed to consistent Marijuana and nicotine marketing due to neighboring Illinois and Michigan that have legalized use. A low perception of harm is also noted for nicotine.	<p>Porter County residents do not see the dangers that are associated with Marijuana and liquid nicotine because of ad campaigns that normalize the behaviors</p> <p>Porter County experiences challenges in its youth and adult populations in relation to both use and abuse of cannabinoids and/or nicotine products in all their various forms.</p> <p>Neighboring Illinois and Michigan openly sell Marijuana in store often times to minors.</p> <p>Adults and minors travel to legalized Marijuana states in less than an hour and return to Indiana with product for use and for sale.</p> <p>Northwest Indiana has Chicago, Illinois media, TV, radio, billboard influences because of the close proximity – under an hour of travel time and the</p>



	there is evidence of cross culture and ideations
Porter County youth have a low perception of harm when discussing the use and abuse of Heroin, Cocaine, Meth, prescription drugs, and other illicit substances.	<p>Porter County youth are at higher risk for developing substance use disorder due to diluted peer and family norms</p> <p>Porter County is lacking in youth peer to peer mentoring and youth participation in preventative substance use education</p> <p>Porter County struggles with use and abuse of illicit drugs such as Heroin, Cocaine, Meth, and a variety of prescription medications with polysubstance use being of key concern. Use of these illegal substances is negatively affecting a variety of legal, health, and social outcomes.</p>
In Porter County, both the youth and adult populations have a low perception of harm when discussing alcohol use/abuse.	<p>Porter County Residents, both young and old, have been impacted by health, legal, financial, socioeconomic and quality of life characteristics by the misuse and abuse of alcohol products</p> <p>Porter County residents, both young and old, have higher than average rates of binge drinking</p> <p>Porter County adults do not properly lock up their alcohol which leads to minors having unlimited, unsupervised access to the alcohol</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
Porter County experiences challenges with Marijuana, cannabinoids and vaping products in all their various forms.	<p><b>Marijuana:</b></p> <p><b>Adults</b> Treatment admissions with marijuana use and dependence reports showed that the number episode data of marijuana use in Porter County was increased from 81 to 163 between 2018 to 2019; the marijuana dependence was increased from 32 to 53.</p> <p>In 2020, there were 261 incarcerations due to marijuana use in Porter County, which occupied 21.8% of total incarceration of substance uses .</p> <p>More than a third (37.6 percent) of sexual minority adults 18 and older reported past year marijuana use, compared to 16.2% reported by the overall adult population.</p> <p><b>Youth</b> In 2018, 14.7% of Porter County students from 6-12<sup>th</sup> grade students reported current use of Marijuana.</p> <p>The mean age of first time use marijuana among 6-12<sup>th</sup> Porter County students was 13.3; In 2018, 29.9% of male students in 12<sup>th</sup> grade reported it is very easy to get marijuana and 50.9% of male think no risk of try marijuana once or twice.</p>	<p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2019, Page 58</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2018, Page 58</p> <p>IN.Gov. (2020). Indiana drug data.</p> <p>National Institute on Drug Abuse. (n.d.)</p> <p>2018 Indiana Youth Survey (INYS) Porter County Schools 6-12<sup>th</sup> Grade Students</p> <p>2018 Indiana Youth Survey (INYS) Porter County Schools 6-12<sup>th</sup> Grade Students</p> <p>2019 Data sheets collected by PCSAC from 7 Porter County Middle and or High</p>



	<p>In 2019 - 7 Porter County Schools reported a total of 64 suspensions/expulsions related to vaping either Marijuana or nicotine.</p> <p><b>Tobacco products</b></p> <p><b>Adults</b> In 2018, Indiana had a higher a rate of tobacco produce use in the past month than U.S rate [Indiana: 27%; U.S: 22%].</p> <p>Adult Smoking Prevalence in Indiana, by Gender, Race/Ethnicity, and Age Group 23.4% male; 19% female; 21.8% Caucasian; 20.7 % AfricanAmerican; 12.9 % Hispanic; 18-24 Yrs. old: 18.4%; 25-34 Yrs. old: 25 %; 35-44 Yrs. old: 24.8%; 45-54 Yrs. old: 27.5%; 55-64 Yrs. old: 22.7%; 65+ Yrs. old: 10.6%;</p> <p>The CDC investigated 805 confirmed cases and 12 deaths due to arespiratory illness associated to vaping nicotine.</p> <p>Since early August 2019, Indiana has 60 cases confirmed vaping-related lung injuries, probable 68 cases, and 6 death March 2021.</p> <p><b>Youth</b> 151,000 (approximately 1 in 10) Indiana youth now under the age of 18 will die prematurely from a smoking-related illness</p> <p>About 24 % of Indiana high school students and 25.5% Indiana college students</p>	<p>Schools</p> <p>2018 National Survey on Drug Use and Health (NSDUH)</p> <p>Behavioral Risk Factor Surveillance System, (2018)</p> <p>CDC (2019)</p> <p>Indiana State Department of Health (2021)</p> <p>SmokeFreestjoe (n.d.) <a href="http://www.smokefreestjoe.org/initiatives/">http://www.smokefreestjoe.org/initiatives/</a></p>
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	<p>reported current use of e-cigarettes.</p> <p>The percentage of electronic vapor products use was increased by age/grade level. The percentage of cigarette use was decreased from 12.8% to 9.5% for 12<sup>th</sup> grade student in Porter County from 2016-2018; However, the percentage of Electronic Vapor Products use was increased from 18.9% to 26.8% for 12<sup>th</sup> grade students in Porter County from 2016-2018.</p> <p>8.5 % of 12<sup>th</sup> grade Porter County students report using electronic vaping products 40+ times in the last 30 days</p> <p>A total 122 incidents and 110 unique students involved in suspensions/expulsions due to tobacco use in Porter County, Academic Year 2018</p>	<p>2019, The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile (page 3 )</p> <p>2018 Indiana Youth Survey (INYS) Porter County Schools 6-12<sup>th</sup> Grade Students</p> <p>2019, The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile (page 43)</p>
<p>Abuse/use of Prescription Drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs negatively affect the quality of life in Porter County.</p>	<p>Porter County had a higher opioid prescription dispensations rates than Indiana [Porter County : 218.6 per 1,000; Indiana: 200.4 per 1,000]</p> <p>The non-fatal inpatient hospitalizations related opioid overdose rates was 23.5 per 100,000 in Porter County which was higher than Indiana [Indiana: 20.8 per 100,000] in 2019</p> <p>In 2019, there were 33 people died involving opioid use, 30 people died involving pain killers, and 19 people died involving synthetic opioids.</p>	<p>Indiana State Department of Health (2020)</p> <p>Indiana State Department of Health (2020)</p> <p>Indiana State Department of Health (2020)</p> <p>IN.Gov. (2020). Indiana drug data.</p>



	<p>The total number of Nalocone events were increased from 121 to 217 between 2019-2020 in Porter County.</p> <p>In 2020, a total of 1132 incarceration due to illegal drug, which included 31 cases invlvoed cocaine, 158 cases invlvoedcontolledsusbtances, 73 cases invlvoed meths, 81 cases invlvoed opioid, and 283 cases invlvoed paraphernalia.</p> <p>In 2019, a total of 466 cases of treatment admission in Porter County: 22.5% of Rx Opioid Misuse, 12.2% Rx Opioid Dependence, 39.9% of Heroin Use, 33.7% of Heroin Dependence; 22.5% of Cocaine Use, 5.2% of Cocaine Dependence, 7.3% of Meth Use, 1.7% Meth dependence.</p> <p>In 2019, middle and or high schools throughout the county reported 96 suspensions/expulsions related to illicit drugs.</p> <p>15.7% of babies in Indiana tested positive to opioids as compared to the nationwide average of 10.7%.</p> <p>Porter County Students reported using prescription painkillers not prescribed to them over 1-5 times in the past month :  7<sup>th</sup> grade: 1.5%;  8<sup>th</sup> grade: 1.2%;  9<sup>th</sup> grade: 2.2%;  10<sup>th</sup> grade:2.4%;  11<sup>th</sup> grade: 2.3%;  12<sup>th</sup> grade: 2.6%,</p> <p>In 2019, 115 juvenile drug</p>	<p>IN.Gov. (2020). Indiana drug data.</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2019 (page 75, 91 )</p> <p>2019 Data sheets collected by PCSAC from 7 Porter County Middle and or High Schools.</p> <p>2017 Indiana State Department of Health reported by NWI Times  <a href="https://www.nwitimes.com/news/special-section/opioids-in-nwi/babies-are-being-born-addicted-to-opioids-in-indiana-at/article_baa97c4c-d4f8-5f2c-b4d4-5c1fe44534e2.html">https://www.nwitimes.com/news/special-section/opioids-in-nwi/babies-are-being-born-addicted-to-opioids-in-indiana-at/article_baa97c4c-d4f8-5f2c-b4d4-5c1fe44534e2.html</a></p> <p>2018 Indiana Youth Survey</p> <p>2019 Data sheets collected by PCSAC</p>
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	<p>arrests were reported</p> <p>SAMHSA's <i>National Survey on Drug Use and Health</i> estimated 4.5% of Indiana residents ages 12 and older misused pain medication in the past year compared to the national average of 3.9%</p> <p>1.8% of Indiana residents ages 18-25 report use of Methamphetamine in the past year compared to the national average of 1%</p> <p>In 2019, about 7% of women reported using prescription opioid pain relievers during pregnancy.</p> <p>The percentage of Hoosier students reporting a parent serving time in jail ranges from a high of 24.1% among 6th grade youth to 17.6% of 12th grade youth.</p> <p>In 2018, 6.3 million sexual minority adults had a mental and or substance use in the U.S.</p>	<p>from 7 law enforcement agencies.</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2019, page 62</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2019, page 81</p> <p>CDC, (2020)</p> <p>2019 Indiana KIDS COUNT Data Book. (Indiana Youth Institute, 2019)</p> <p>National Institute on Drug Abuse (2020) 2018 National Survey on Drug Use and Health: Lesbian, Gay and Bisexual Adults</p>
<p>Alcohol use/abuse by both youth and adults has led to a decline in the quality of life in Porter County.</p>	<p><b>Adults:</b> In 2020, there were 610 adult alcohol arrests through-out Porter County.</p> <p>Alcohol-impaired driving deaths in Porter County was increased from 11% to 16% 2017-2018.</p> <p>Treatment admissions with alcohol use and dependence reports showed that the number episode data of alcohol use in Porter County was increased from 81 to 187 between 2018 to 2019; the alcohol dependence was increased from 50 to 147.</p>	<p>IN.Gov. (2020). Indiana drug data.</p> <p>County Health Ranking (2020).</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2018, 2019, page 18</p>



	<p>Primary alcohol use reported at treatment admission in Porter County was 31.4%, which was higher than Indiana (27%) in 2019.</p> <p>In 2019, there were 17 people died related to alcohol.</p> <p>In Indiana, 56.7% males and 45.8% females report having used alcohol in the past 30 days.</p> <p>In Indiana, 51.6% Caucasian; 48.8% African American. 50.2% Asian, and 49.5% of the Hispanic report having used alcohol in the past 30 days.</p> <p>The percentage of Indiana Audlts having used alcohol in the Past 30 days by age groups:</p> <p>18-24 Yrs. old: 54.1%;  25-34 Yrs. old: 61.1 %;  35-44 Yrs. old: 59%;  45-54 Yrs. old: 58.2%;  55-64 Yrs. old: 45.9%;  65+ Yrs. old: 33.8%.</p> <p><b>Youth:</b>  Since 2017, child removals due to parental alcohol abuse was increased from 10.4% to 14.3% until 2019.</p> <p>In 2019, there were 61 juvenile alcohol related arrests.</p> <p>27.3% of 12<sup>th</sup>,  23.3% of 11<sup>th</sup>,  20.1% of 10<sup>th</sup>,  16.5% of 9<sup>th</sup>,  13% of 8<sup>th</sup>, and  6.1% of 7<sup>th</sup> grade self-reported past 30 days alcohol use in Porter County.</p> <p>11.1% of 12<sup>th</sup> and 12.2 % of</p>	<p>Indiana University Purdue University , Fairbanks Public Health School (2019).</p> <p>Indiana State of Health Department (2020)</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2019, page 9</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2019, page 9</p> <p>The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile 2017, 2018, 2019, page 23, 22, 22</p> <p>2019 Data sheets collect by PCSAC from 7 law enforcement agencies</p> <p>2018 Indiana Youth Survey (INYS) Porter County Schools 7-12<sup>th</sup> Grade Students</p> <p>2018 Indiana Youth Survey (INYS) Porter County Schools 7-12<sup>th</sup> Grade Students</p> <p>2018 Indiana Youth Survey (INYS) Porter</p>
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	<p>11<sup>th</sup> grade self-reported past 30 days binge drinking in Porter County.</p> <p>36.6% of 12<sup>th</sup> grade students and 39.1% of 11<sup>th</sup> grade students reported it would be easy to get alcohol.</p> <p>Nationally, 7 out of 10 people who identify as part of the LGBTQ+ population, or 70.2%, struggle with the use of alcohol.</p>	<p>County Schools 7-12<sup>th</sup> Grade Students</p> <p>2018 National Survey on Drug Use and Health: Lesbian, Gay and Bisexual Adults</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)?
Porter County experiences challenges with Marijuana, cannabinoids and vaping products in all their various forms.	<p>Encourage elected officials to oppose the legalization of Marijuana.</p> <p>Encourage elected officials to include product packaging design guidelines when creating legislation to reduce the appeal to youth.</p> <p>Provide support and resources to community sectors to reduce use/abuse.</p> <p>Support classroom evidence-based health curriculum that addresses Marijuana and related issues.</p> <p>Continue to encourage local schools to participate in the Indiana Youth Survey to collect data.</p> <p>Create &amp; distribute prevention media campaign</p> <p>Provide youth mentoring opportunities to assist at-risk youth</p> <p>Create a collaboration with Sheriff's Department, recovery houses, community colleges to provide support to those incarcerated to assist completion of high school course work and further education to reduce recidivism.</p>



	<p>Support a dedicated Certified Prevention Specialist at each school. Assist with training and certification requirements.</p> <p>Develop content for Matters of Substance podcast and WVLP broadcast to educate the public on the topics of Marijuana, cannabinoids, vaping and nicotine products.</p>
<p>Abuse/use of Prescription Drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs negatively affect the quality of life in Porter County.</p>	<p>Provide support and resources to community sectors to reduce use/abuse.</p> <p>Support classroom evidence-based health curriculum that addresses illicit substances and related issues.</p> <p>Prevention media campaign</p> <p>Support youth driven activities at community level to provide prevention education and reduce the use of prescription drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and illicit drugs.</p> <p>Support a dedicated Certified Prevention Specialist at each school. Assist with training and certification requirements.</p> <p>Provide youth mentoring opportunities to assist with at-risk youth.</p> <p>Develop content for Matters of Substance podcast and WVLP broadcast to educate the public on related topics.</p> <p>Supplant Youth Council's at middle/high schools to promote healthy choices, increase protective factors, and reduce risk factors.</p> <p>Create a collaboration with Sheriff's Dept., recovery houses, community colleges to provide support to those incarcerated to assist completion of high school course work and further education to reduce recidivism.</p> <p>Support harm reduction efforts to safely collect and dispose of unused and unwanted prescription drugs and needles/syringes at drop off locations throughout the county.</p> <p>Encourage schools to participate in the Indiana Youth Survey.</p>



	Develop content for Matters of Substance podcast and WVLP broadcast to educate the public on the topics of prevention/treatment/recovery of illicit drugs.
Alcohol use/abuse by both youth and adults has led to a decline in the quality of life in Porter County.	<p>Educate adults about the harm alcohol can cause to youth development.</p> <p>Support classroom evidence-based health curriculum that addresses alcohol and related issues.</p> <p>Supplant Youth Council's at middle/high schools to promote healthy choices, increase protective factors, and reduce risk factors.</p> <p>Support a dedicated Certified Prevention Specialist at each school. Assist with training and certification requirements.</p> <p>Continue to encourage local schools to participate in the Indiana Youth Survey.</p> <p>Prevention strategies for underage drinking as classroom curriculum.</p> <p>Create a collaboration with Sheriff's Department, recovery houses, community colleges to provide support to those incarcerated to assist completion of high school course work and further education to reduce recidivism.</p> <p>Develop content for Matters of Substance podcast and WVLP broadcast to educate the public on the topics of prevention/treatment/recovery of alcohol use/misuse.</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 Marijuana**

##### **Goal 1**

Increase awareness and educate the community concerning the risk of use/abuse of Marijuana, cannabinoids and nicotine substances and related products by 7% per year.



<p>Goal 2</p> <p>Decrease the use of Marijuana, cannabinoids and nicotine by adults and juveniles by 6% over the next 3 years with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.</p>
<b>Problem Statement #2 – Illicit Drugs</b>
<p>Goal 1</p> <p>Reduce the number of deaths from prescriptions drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs by 5% over the next 3 years through partnerships with law enforcement, justice, treatment and education.</p>
<p>Goal 2</p> <p>Increase community awareness of the problems and solutions associated with prescription drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs by 15% over the next 3 years with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.</p>
<b>Problem Statement #3– Alcohol</b>
<p>Goal 1</p> <p>To reduce the use of alcohol by 5% over the next 3 years by increasing media campaigns and introducing evidence-based curriculum to underserved populations.</p>
<p>Goal 2</p> <p>Increase awareness and educate residents by 10% on the harmful effects and consequences of misuse of alcohol by youth and adults with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.</p>

### Step 5: Plans to Achieve Goals

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

<b>Problem Statement #1 Marijuana</b>	<b>Steps</b>
<p>Goal 1</p> <p>Increase awareness and educate the community concerning the risk of use/abuse of Marijuana, cannabinoids and nicotine substances and related products by 7% per year.</p>	<p>Encourage elected officials to oppose legalization of marijuana in the state of Indiana.</p> <p>Support educational efforts about the mental health risks, pre-natal</p>



		<p>consequences, and brain science as a gateway drug.</p> <p>Establish focus groups and peer panels in the local area schools to collect data and monitor trends</p> <p>Encourage schools to participate in the Indiana Youth Survey for the purpose of collecting data on marijuana, cannabinoids and nicotine use</p> <p>Support youth mentoring initiatives with an emphasis on at-risk youth in elementary through high school to increase protective factors and decrease risk factors for substance use/abuse.</p> <p>Develop and execute town hall events to support evidence of the risks of Marijuana for elementary aged youth, pre-natal and pregnant populations.</p> <p>Support substance use education and trending topics related to marijuana and nicotine through partnerships with the Matters of Substance podcast and mass communication efforts to increase environmental reach.</p>
<p>Goal 2</p> <p>Decrease the use of Marijuana, cannabinoids and nicotine by adults and juveniles by 6% over the next 3 years with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.</p>		<p>Increase law enforcement capacity and provide technological tools to assist in identifying impaired drivers and assess environs</p> <p>Support and encourage therapeutic and/or alternative treatment programming, with an emphasis on evidence-based programming for targeted populations</p> <p>Encourage and support programs that serve individuals in recovery as a means to increase protective factors against substance use.</p>
<b>Problem Statement #2 Illicit Drugs</b>		<b>Steps</b>
Goal 1		Promote the use of the INSPECT



Reduce the number of deaths from prescriptions drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs by 5% over the next 3 years through partnerships with law enforcement, justice, treatment and education coalition member agencies and broaden the community network.

prescription data base system by doctors and law enforcement as a means to reduce overprescribing of medications.

Build capacity by partnering with member agencies.

Support educational opportunities for incarcerated population leading to high school equivalency degree and/or post graduate education at college or trade school.

Partner with treatment agencies to provide innovative and useful programming to address the psychological, emotional impact of incarceration – family engagement, art and music therapy; as well as skill building to increase employment opportunities upon release

Support law enforcement and justice to for arrest, conviction, rehabilitation of offender. Including but not limited to additional patrols, social worker placement, PARRI program, recovery support.

Support and encourage therapeutic and/or alternative treatment evidence-based programming to address prescription, Opioid, Meth, Heroin, and other illicit drug use/abuse with an emphasis on target populations such as incarcerated individuals.

Encourage and support formation of recovery groups and alternative peer groups to aid those individuals struggling with substance use disorder.

Support stigma-based reduction programs and campaigns.

Increase evidence-based initiatives in targeted populations-rural communities,



		gender specific, pre-natal and pregnant, geographically specific, and age specific populations such as adults 65 and over. South Haven, Kouts, and Hebron
Goal 2 Increase community awareness of the problems and solutions associated with prescription drugs, Opioids, Heroin, Cocaine, Meth, polysubstance and other illicit drugs by 15% over the next 3 years with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.		<p>Increase the awareness and collection of unused and unwanted prescription drugs and needles/syringes at drop off locations throughout the county</p> <p>Create multi-agency collaboration to develop innovative media campaign to increase awareness and incite action.</p> <p>Support substance use education and trending topics related to Opioid based prescriptions that address the dangers of illicit and prescription medications through partnerships with the Matters of Substance Podcast and mass communication efforts to increase environmental outreach strategies</p> <p>Encourage schools to participate in the Indiana Youth Survey for the purpose of collecting data on prescription abuse, Opioid, Meth, Heroin, and other illicit drug use</p> <p>Support youth mentoring initiatives with an emphasis on at-risk youth in elementary through high school to increase protective factor and decrease risk factors for substance use.</p> <p>Support school youth council to promote leadership, peer training, and a school-based initiative encouraging behavioral wellness, healthy choices, increasing protective factors, and reducing risk factors for substance use.</p>
<b>Problem Statement #3–Alcohol</b>		<b>Steps</b>
Goal 1 To reduce the use of alcohol by 5% over the next 3 years by increasing media campaigns and introducing evidence-based curriculum and		Support and encourage therapeutic programming that focuses on use and/or abuse of alcohol with an emphasis on



<p>strategies to underserved populations.</p>	<p>target populations</p> <p>Increase law enforcement capacity and provide technological tools to assist in identifying impaired drivers and assess environs</p> <p>Encourage and support alternative treatment programming for alcohol related offenders through problem solving courts and other diversionary programming.</p> <p>Support stigma-based reduction programs and campaigns.</p> <p>Encourage and support formation/expansion of recovery groups and alternative peer groups to aid those individuals struggling with substance use disorder.</p> <p>Encourage and support programs that serve individuals in recovery as a means to increase protective factors against substance use disorder.</p> <p>Support educational opportunities for incarcerated population leading to high school equivalency degree and/or post graduate education at college or trade school.</p> <p>Increase evidence-based initiatives in targeted populations-rural communities, gender specific, pre-natal/pregnant, geographically specific, college aged and age specific populations.</p>
<p>Goal 2</p> <p>Increase awareness and educate residents by 10% on the harmful effects and consequences of misuse of alcohol by youth and adults with special emphasis on target populations: elementary aged, prenatal/pregnant, 65+, geographical, college, LGBTQ+, et al.</p>	<p>Promote alcohol awareness and/or educational programs/strategies</p> <p>Support youth mentoring initiatives with an emphasis on at-risk youth in elementary through high school to increase protective factors and decrease risk factors for substance use and family preservation.</p>



	<p>Support programs that educate parents of their importance in modeling responsible consumption of alcohol in the presence of their children.</p> <p>Encourage schools to participate in the Indiana Youth Survey for the purpose of collecting data on alcohol use</p> <p>Support education and all efforts related to substance use through partnership with the Matters of Substance podcast and WVLP radio. Increase mass communication efforts to provide environmental outreach strategies.</p> <p>Support a Youth Council to promote leadership, peer training, and a school-based initiative encouraging mental and behavioral wellness, healthy choices, increasing protective factors, and reducing risk factors for substance use/abuse.</p>
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