

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

County: Marion

LCC: Drug Free Marion County

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Plan Summary

Mission Statement: Drug-Free Marion County, Inc., a not-for-profit organization, plans, promotes, implements, and coordinates community efforts to prevent and reduce abuse of alcohol, tobacco, and other drugs among youth and adults.

History: Drug-Free Marion County was formed in 1998 as a restructured Local Coordinating Council for Marion County. The organization was incorporated in 2000 and we received our 501c3 non-profit status in 2001. Since that time we have obtained several grants to expand our opportunities and meet some identified needs in the community.

In 2001, we were one of 15 cities selected to participate in the Demand Treatment! Project funded by the Robert Wood Johnson Foundation and administered by the Join Together Organization, Boston University School of Public Health. This grant focused on expanding substance abuse treatment access through screening in primary healthcare settings. That project officially ended in 2003, but the strategy of implementing SBIRT (Screening, Brief Intervention, Referral and Treatment) is still being implemented.

Also in 2001, we received a Drug-Free Communities Support Program (DFCSP) grant from the Office of Juvenile Justice and Delinquency Prevention. Through this grant we created a separate Youth ATOD Prevention Coalition and implemented the Strategic Prevention Framework in several communities within Marion County. We were also able to bring on board a Project Coordinator and part-time Clerical Assistant to assist with implementation and other tasks. We completed the fifth year of funding, but our proposal for the first of an additional five years was not approved. We are planning to reapply for DFCSP funding again in 2007.

The DFCSP allowed us to implement some new initiatives during the last year, including setting up a specific Youth ATOD Prevention Coalition, a media campaign focused on parent education, a parent booklet entitled "Start Talking Before They Start Using" and parent surveys and focus groups to assess the level of parent awareness and perception of youth use of ATOD in Marion County.

Early in 2003, we also received a one-time grant from the Hoover Foundation. These dollars are being used to print a comprehensive Treatment Provider Directory for Marion County. This project began in 2002 with developing a database and conducting a subsequent survey of local providers. Thus far, we have printed and distributed more than 2,500 of these directories to schools, libraries, law enforcement, the courts, treatment and healthcare providers and others. Additionally, the directory is available on our website, www.drugfreemarioncounty.org, in a searchable format.

In late 2003, we were awarded a grant from the Nina Mason Pulliam Charitable Trust to implement an SBIRT pilot project which partnered several healthcare clinics with treatment providers to identify substance use among their clients. The project proved especially successful at the Bellflower Clinic with their STD/HIV patients. The project also led to instituting a screening process at the Arrestee Processing Center which

continues through a grant received by the Public Defender Agency from the Indiana Criminal Justice Institute.

In 2002, we also produced and distributed our first substance abuse report entitled, “A Community At-Risk: Drug-Free Marion County’s SNAPSHOT of Alcohol, Tobacco and Other Drug Use.” This report includes data and trends on 17 key indicators including: youth drug use, tobacco sales to minors, juvenile and adult drug offenses, arrestee drug test results, drug seizures, alcohol related crashes, drug related deaths and addiction treatment recipients. The fourth edition of the SNAPSHOT will be coming out in January 2007.

Also in 2002, we were asked to serve as the Local Coordinating Council for the Indianapolis ADAM (Arrestee Drug Abuse Monitoring) Project. Directed by the National Institute of Justice (NIJ), the ADAM Project gathered data from testing adult arrestees for illegal drug use. Our role was to integrate the data into local planning and assist with dissemination of results to a broader audience. Some of the ADAM data has been included in the SNAPSHOT mentioned previously. The ADAM project ended in December 2004.

During 2002 we created our website, www.drugfreemarioncounty.org. This website was updated in September 2005 and includes not only general information about the organization, activities and grant projects, but also has copies of our Comprehensive Community Plan, the SNAPSHOT and Provider Directory. Most recently, we included a Parent page to coincide with our education and awareness efforts aimed at this population. We also place our annual Drug Free Community Fund application online.

Our Board of Directors meet on a bi-monthly basis. Channel 16, our local government cable channel, televises one of our board meetings each quarter. This has significantly increased our exposure to a broader community audience. In addition to our regular business meetings, we often have guest presenters give us information on various topics. Besides a 25-member board, there are six standing committees: Treatment, Prevention/Education, Criminal Justice, Public Awareness, Finance/Development and RFP/Evaluation. We currently have nearly 60 individuals from our board, grantee organizations, concerned citizens and other interested parties actively participating on these committees.

Summary of the Comprehensive Community Plan:

This plan was created over a period of more than six months as various groups met to assist us in putting this document together. The effort and time put into this task by the committees and other groups is a testament to their commitment to helping DFMC create a plan with more targeted and measurable objectives and goals.

Our Prevention/Education and Treatment Committees began discussing data sources and determining the most pressing priorities at their monthly meetings beginning in June. Our Youth ATOD Prevention Coalition and an Ad-Hoc committee of treatment providers and others later provided additional input and refining.

We also assembled a working group of criminal justice professionals to work on that section of the plan. This group met monthly for several months to discuss possible priorities and search out relevant data.

Our board of directors held a special meeting in October to begin piecing together the various sections of the plan and determine key areas for further attention. An outside facilitator was brought in to lead them in this process.

Finally, a small group of individuals from each of the aforementioned groups met several times to formulate the final drafts. These were again reviewed and refined to develop the final plan before submitting to our board for approval.

It should be noted that each group that spent time on developing this plan found that there was an apparent lack of local data to directly support the priority areas. This also proved troublesome when attempting to develop baseline measures for determining goal achievement. Consequently, an Objective is included under each Problem Statement to support efforts to develop and implement mechanisms to identify, collect and evaluate data relevant to the identified problem.

Geographic Area Served:

Marion County/Indianapolis has a population of approximately 800,000 residents. The county includes both urban and suburban districts. There are eleven school districts within the county borders. The inner city hosts manufacturing and industrial businesses as well as some retail outlets. The suburban areas have more residential and retail space and less manufacturing and industrial businesses. There are small and medium-sized businesses as well as large corporate offices throughout the county.

Grant Process:

Drug Free Marion County solicits proposals from the community via an RFP (Request for Proposal) process. We host a Bidder's Conference to share important information about completing the application, submitting proposals, how proposals are evaluated and timeframes for review and approval.

We enlist a Review Panel of at least 15 individuals to read and review the proposals. (No more than 1/3 of the panel can be board members.) Their recommendations for funding are then reviewed by our Board of Directors and then passed along to the Criminal Justice Planning Council (CJPC). The CJPC conducts their own review of the proposals and make recommendations to the City-County Council for final approval.

Monitoring Role:

Drug-Free Marion County monitors progress of those programs funded by the County Drug-Free Communities Fund through several methods. Each program is required to submit quarterly Program and Financial Reports to our office. The Executive Director

also conducts site visits. In addition, our committees include representatives from each program who report on their funded projects and sometimes host meetings at their sites.

Membership List

County LCC Name: Marion

Name	Organization	Race	Gender	Category
Rob Wilkins	Wilkins Tax Service	African American	Male	Business
Chuck Wills	Mary Ober Foundation	Caucasian	Male	Funders
David Shaheed	Marion Superior Ct.	African American	Male	Judiciary
Jerry Barker	Indianapolis Police Dept.	Caucasian	Male	Law Enforcement
Carson Soule	Marion County Mental Health	Caucasian	Female	Mental Health
Tony Williamson	St. Florian Center	African American	Male	Civic Organizations
Dan Crowe	Retired	Caucasian	Male	Elderly
Anna Hail	Treatment Interventions Plus	Hispanic	Female	Health
William Klepper	Retired	Caucasian	Male	Labor
Collette Duvall	Health & Hospital Corp.	African American	Female	Media
Bill Hubbs	Southeast Community Service	Caucasian	Male	Neighborhoods
Marissa Manlove	Noble of Indiana	Caucasian	Female	Parents
Jonathan Adland	Indianapolis Hebrew Congregation	Caucasian	Male	Religion
Nate Rush	Bethlehem House	African American	Male	Recovery
Charlotte Pontius	Fairbanks	Caucasian	Female	At-Large
Kandace Hoosier	Warren Central High School	African American	Female	Youth

George Brenner	Gallahue Mental Health Center	Caucasian	Male	Treatment
Fran Safford	Hamilton Center	Caucasian	Female	At-Large
Dennis Jackson	Martin University	African American	Male	At-Large
Jerry McCory	Office of the Mayor	Caucasian	Male	Mayor
Dorothy Conklin	Marion County Auditor	Caucasian	Female	Auditor
Fred White	Marion County Prosecutor	Caucasian	Male	Prosecutor
Greg Bowes	City-County Council	Caucasian	Male	City-County Council

Problem Identification

Problem Statement #1: The use of alcohol, tobacco and other drugs (ATOD) by youth in Marion County continues to be above regional and state averages.

Supportive Data:

- Marion County 6th, 8th, 10th and 12th grade students report higher usage of alcohol and significantly higher usage of marijuana than other students in the Central Region of Indiana (2005-06 Indiana Prevention Resource Center Prevalence Surveys)
- Marion County 6th and 8th grade students report higher usage of alcohol than other students in Indiana (2005-06 Indiana Prevention Resource Center Prevalence Surveys)
- Marion County 6th grade students report use of tobacco, alcohol and marijuana at rates 2 to 3 times higher than other 6th grade students in the Central Region of Indiana as well as throughout the rest of the state (2005-06 Indiana Prevention Resource Center Prevalence Surveys)

Objectives:

- A. Support evidence based prevention programs, strategies and approaches.
- B. Support non-punitive initiatives, such as drug screening, Student Assistance Programs, etc.
- C. Support implementation of school-based ATOD prevention curricula.
- D. Support programs that reduce underage drinking.
- E. Support initiatives that improve local collection of data regarding ATOD use by youth.

Goals:

1. Decrease by 2% the number of Marion County youth reporting 30-day use of any substance.

Problem Statement #2: Parents are not aware of the level of youth substance use in Marion County.

Supportive Data:

- More than 32% of 10th and 37% of 12th grade students in Marion County report drinking alcohol within the last 30 days and 24 % of both 10th and 12th grade students reported using marijuana during that same timeframe. (Indiana Prevention Resource Center Prevalence Survey, 2006)
- In a recent survey, 30% of Marion County parents indicated they believe that youth in their community use alcohol and other drugs less than students actually reported using. (Drug Free Marion County Parent Survey, 2006)

Objectives:

- A. Implement evidenced based educational programs targeting parents.
- B. Collaborate with faith-based and community organizations to provide education to parents.
- C. Support initiatives for parents of at-risk youth.
- D. Refine survey in Marion County that adds consistency of reported use by youth and parent recognition of that use.
- E. Support initiatives that improve local collection of data regarding parent perceptions and awareness of youth ATOD use.
- F. Support distribution of the DFMC parent awareness brochure to schools, parent groups, youth serving and faith-based organizations.

Goals:

1. Increase parent awareness of alcohol and drug use among youth in their community by 10%

Problem Statement #3: The number of detox services available in Marion County is less than 50% of the current need for individuals who do not have a 3rd party payer or the means to pay outright.

Supportive Data:

- Only one treatment provider in Marion County has public access beds for residential detox services.
- This provider has 22 beds available for those needing detox services and turns away 17-27 prospective detox patients per day.
- They report having seen a 43.8% increase in the number of admissions for detox services from 2002 to 2005.
- In 2005, Marion County was able to serve 38% of the low-income individuals requesting treatment services. (Hoosier Assistance Program Client Data)
- Based on estimates from the 2005 Single Night Street and Shelter Count, there are a minimum of 69 individuals per night who are homeless, have an alcohol dependence and could benefit from an engagement center. (Draft of

Engagement Center Concept Paper/Business Plan, Coalition for Homelessness Intervention and Prevention)

Objectives:

- A. Provide increased diversity of detox services to individuals with limited financial resources.
- B. Support programs that increase detox services.
- C. Collect data regarding: referrals for detox, detox admissions and calls/requests for detox

Goals:

1. Increase by 20% available detox services for individuals with limited financial resources. (Detox services may include wet shelters, drying out stations, outpatient detox, and homeless shelters that accept intoxicated individuals.)

Problem Statement #4: The number of individuals who complete treatment is directly impacted by their unmet functional needs (i.e.-employment, housing, child care, transportation, etc.)

Supportive Data:

- In Marion County, there is a 22% rate of retention per treatment episode for adults and a 10% youth retention rate per episode for individuals receiving 90 or more days of HAP supported treatment in 2005. (Indiana FSSA, Division of Mental Health and Addiction)
- Marion County has a higher poverty rate (11%) than the state average (9%) based on the recent 2000 Census data.
- More than 11% of Marion County residents receive food stamps compared to 7% throughout the rest of the state. (Indiana FSSA, Div. Of Family & Children, 2004)
- “Effective treatment attends to multiple needs of the individual, not just his or her drug use. Treatment must address the individuals drug use and associated medical, psychological, social, vocational and legal problems.” (Principle #3 of the 13 Principles of Addiction Treatment, National Institute on Drug Abuse.)
- As a result of hiring a Client Advocate, Family Services reported the following outcomes for the first 6 months of 2006 as compared to the first 6 months of 2005:
 1. 10% increase in number of individuals assessed with substance use disorder beginning treatment
 2. An increase of 6% in client completion rate from 2005 to 2006
 3. An expected improvement in these percentages for the 2nd half of 2006

Objectives:

- A. Increase the number of treatment providers who provide care or resource coordination for their clients.
- B. Support community-based case management service models for addicted individuals.

- C. Support training of treatment providers in the utilization of community-based case management approaches in providing services.
- D. Support treatment programs that develop services to meet basic functional needs.
- E. Collect data from treatment providers regarding: retention rates, client service needs, number of services delivered and case management approaches used.

Goals:

1. Increase by 5% the number of HAP supported individuals engaged in treatment for 90 days or longer.

Problem Statement #5: Use of alcohol and drugs is a major contributor to crime in Marion County.

Supportive Data:

- Based upon 2003 ADAM (Arrestee Drug Abuse Monitoring) data, 65% of adult males tested positive for any drug at the time of their arrest, with 39% testing positive for cocaine and 45% testing positive for marijuana.
- Nearly 30% of violent crime victims believe that the offender was using alcohol and/or drugs at the time of the crime. (Crime Victimization in the United States, 2004, Bureau of Justice Statistics)
- The Marion Superior Court dedicates Criminal Courts 14 and 20 exclusively to the disposition of drug cases. In 2005, 2,520 misdemeanor and low-level drug felony cases were handles in Court 14 and over 1,800 major and low-level felony drug cases were handled in Court 20. (Report from the Marion Superior Court Administrator's Office.)
- 48% of those released from the Indiana Dept. of Correction in 2001 and 2002 for committing crimes in Marion County had re-offended within the next 3 years after their release.

Objectives:

- A. Support use of evidence based drug treatment diversion programs.
- B. Support assessment and treatment for juveniles arrested for drug related crimes.
- C. Support distribution of DFMC Treatment Provider Directory to law enforcement, courts, probation, prosecutors, etc.
- D. Support initiatives that improve local collection of data regarding use of alcohol and drugs by those committing crimes.
- E. Support increased resources for the Public Defender's Office, Prosecutor's Office and Probation Department for handling drug/alcohol-related cases.
- F. Support increased resources for local law enforcement agencies and other organizations in combating criminal activity related to alcohol and other drugs.

Goals:

- Reduce recidivism rates by 1% for those committing crimes in Marion County.

Next Annual Update Due: January 2008

Next Comprehensive Community Plan Due: **January 2010**

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: RPM