

# The Indiana Commission to Combat Drug Abuse



*Behavioral Health Division*

## Comprehensive Community Plan

County: Cass County

LCC Name: Partners for a Drug Free Cass County

LCC Contact: Nikki Malott

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City: Logansport

Phone:

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County Commissioners: Mike Stajduhar, Ruth Baker, Dean Davenport, Bruce Ide, Tracy Williamson

Address: **Cass County Government Building** Room 200 • 200 Court Park

City: Logansport

Zip Code: 46947

## **Vision Statement**

What is your Local Coordinating Council's vision statement?

Bringing people in the community together to provide the best support and resources in an effort to bring greater public awareness to the problems that exist, in our community, related to the abuse of alcohol and other drugs. Working together to create a safer and healthier community.

## **Mission Statement**

What is your Local Coordinating Council's mission statement?

The mission of the Cass County Local Coordinating Council is to identify, coordinate, and facilitate the use of services and available funds in meeting the county's needs in prevention, treatment, and law enforcement as a result of alcohol and drug abuse in Cass County.

<b>Membership List</b>					
<b>#</b>	<b>Name</b>	<b>Organization</b>	<b>Race</b>	<b>Gender</b>	<b>Category</b>
1	<b>Stephanie Shostok</b>	<b>Alkerme</b>	<b>C</b>	<b>F</b>	<b>Treatment</b>
2	<b>Rick Hollering</b>	<b>Youth Services Alliance</b>	<b>C</b>	<b>M</b>	<b>Prevention</b>
3	<b>Nikki Malott</b>	<b>Youth Services Alliance</b>	<b>C</b>	<b>F</b>	<b>Prevention</b>
4	<b>Ed Schroder</b>	<b>Cass Co. Sheriff's Department</b>	<b>C</b>	<b>M</b>	<b>Law Enforcement</b>
5	<b>John Rogers</b>	<b>Logansport Police Dept.</b>	<b>C</b>	<b>M</b>	<b>Law Enforcement</b>
6	<b>Will Scott</b>	<b>Cass County Juvenile Probation</b>	<b>C</b>	<b>M</b>	<b>Law Enforcement</b>
7	<b>Steven Snyder</b>	<b>Snyder Counseling/ CCADCP</b>	<b>C</b>	<b>M</b>	<b>Treatment</b>
8	<b>Karli Armstrong</b>	<b>United Way</b>	<b>C</b>	<b>F</b>	<b>Volunteer</b>
9	<b>Dave Wegner</b>	<b>Cass/ Pulaski Community Corrections</b>	<b>C</b>	<b>M</b>	<b>Law Enforcement</b>
10	<b>Chuck Newton</b>	<b>Kiwanis Club/volunteer</b>	<b>C</b>	<b>M</b>	<b>Volunteer</b>
11	<b>Thomas Keller</b>	<b>Coroner's Office</b>	<b>C</b>	<b>M</b>	<b>Volunteer</b>
12	<b>Jennifer Lombard</b>	<b>IYI</b>	<b>C</b>	<b>F</b>	<b>Volunteer</b>
13	<b>Kyle Nelson</b>	<b>INDOH</b>	<b>C</b>	<b>M</b>	<b>Volunteer</b>
14	<b>Veronica Osborn</b>	<b>Father's House</b>	<b>C</b>	<b>F</b>	<b>Treatment</b>
15	<b>Tiffany Hamilton</b>	<b>ASPIN</b>	<b>C</b>	<b>F</b>	<b>Treatment</b>
16	<b>Makayla Gusching</b>	<b>SCAN</b>	<b>C</b>	<b>F</b>	<b>Prevention</b>
17	<b>Mikel Fort</b>	<b>EMS</b>	<b>C</b>	<b>F</b>	<b>Law Enforcement</b>

<b>LCC Meeting Schedule:</b>
Please provide the months the LCC meets throughout the year: 2 <sup>nd</sup> Monday of each month from 12pm-1pm. At Revolution Community Church.

## 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 Cass County
<p>County Population</p> <p>In 2020, Cass County had a population of approximately 37k people, over 22% of that population is reported as youth, age 18 and younger. Young adults, 18-24 years old, account for another 8% of the population. The population of Cass County is rather diverse 83.5% reported their ethnicity as white (non-Hispanic), 16.5%, reported as Hispanic/Latino. Other races/ethnicities identified were Asian, Black/African American, American Indian &amp; Alaska Native, etc. It was reported that 9.12% of its residents were born outside the country. The majority of households report they were married without children, at 31%. Another 17.6% report being married with children.</p> <p>The median cost of a home in Cass County is \$89k. The median yearly household income is \$51k and the number of people reporting living in poverty is 12.6%; however, the poverty rate for children under 18 is at 15.6%, both rates are higher than the state averages and one can assume that this rate will rise with the effects of the Covid Pandemic.</p>
<p>Schools in the community</p> <p>Cass has 4 County School Corporations, Logansport Community School Corporation, Lewis Cass School Corporation, and Pioneer Regional School Corporation. Our fourth school corporation is Caston School Corporation which sits right on the Fulton/Cass County line North of Logansport. There are many elementary schools, one sixth grade academy, one standalone junior high school and senior high school, and three jr/sr high schools. Logansport is also known for it's Century Career Center (CCC), which is attached to Logansport High School. Each of the county's high schools offer courses through Logansport's CCC. There is also a juvenile correction facility, an adult learning center, and an Ivy Tech Community College in Logansport.</p>

Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Logansport Memorial Hospital, Indiana Health Centers, Express Med, Cass County Health Department, WIC,
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Four County, Snyder Counseling, Clear Skies Counseling, Comprehensive Counseling, Bowen Center
Service agencies/organizations Area 5, Emmaus Mission, Youth Services Alliance, United Way, Salvation Army, Kiwanis, 4 <sup>th</sup> Dimension Recovery, Father's House, multiple community churches, CASA, DCS, Cass/Pulaski Community Corrections, Cass County Juvenile Probation Dept.,
Local media outlets that reach the community Cass County Communication Network, Pharos Tribune, WLHM 102.3, WSAL, WHZR 103.7, The Network,
What are the substances that are most problematic in your community? We have chosen to focus on alcohol, marijuana, and opioids. These are the three identified substances making the most impact on our community.
List all substance use/misuse services/activities/programs presently taking place in the community: Partners for a Drug Free Cass County, 4 <sup>th</sup> Dimension Recovery, Celebrate Recovery, Cass County Substance Abuse Prevention Coalition, Kiwanis initiatives, United Way initiatives, The Father's House,

## 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
1. Availability of alcohol and other drugs	2. LCC partners work to educate adults on the dangers of making alcohol and other drugs readily available to youth.  3. Sheriff and Police department are helpful with enforcing laws as they pertain to alcohol and other drugs in the community.  4. LCC uses data collected to prioritize which areas they should focus their efforts.	1. Having more key influential members of our community at meetings to help with prevention and treatment.  2. Reaching the “at risk” population to assure proper education as it pertains to drug and alcohol use.  3. Perceived risk of harm is low.  4. Adult family use of drugs makes availability easier.
2. Family substance use	1. LCC partners to educate families on the risks of substance use in families.  2. LCC works at providing helpful information as it pertains to substance use and treatment.  3. LCC partners provide resources for families with evidence base curriculum.	1. Reaching the “at risk” population to assure proper education as it pertains to drug and alcohol use in the family  2. Lack of family activities in the community with concentration on healthy living and educating on substance use.  3. Family Conflict is reported high in Cass County.
3. Limited prevention and recovery resources	1. LCC provides funds to supplement programming.  2. LCC looks to partner and add Coalition	1. Fund availability  2. Lack of events to attend to share information.

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

	<p>members in order to maximize its efforts to distribute valuable information/resources.</p> <p>3. LCC attends community events whenever possible to maintain present and involved in providing information/resources to the community.</p>	<p>3. Limited treatment and prevention options in the county.</p> <p>4. Community doesn't understand that SUD is a treatable medical condition and reduce/remove stigma.</p>
Protective Factors	Resources/Assets	Limitations/Gaps
1. Safe, supportive, connected neighborhood	<p>1. LCC partners work with other areas of the community to become more connected and involved.</p> <p>2. LCC partners work to educate the community on the importance of having a safe, supported connected community.</p> <p>3. LCC partner shares Developmental Asset messaging throughout the community via social media and other outlets.</p>	<p>1. Lack of funds</p> <p>2. Lack of community involvement when opportunities are there to connect and support our community.</p> <p>3. Lack of pride in the community, in some. Negative influences.</p>
2. Range of opportunities in the community for meaningful youth engagement	<p>1. LCC partner provides, in partnership with the local school corporation, an afterschool program.</p> <p>2. LCC partners share information on youth engagement opportunities as it becomes available.</p> <p>3. Many groups in the community that have the ambition and desire to help with youth engagement, should the opportunity for more outreach arise.</p>	<p>1. Nothing for youth to do, and no where for them to go.</p> <p>2. Lack of involvement when community partners try to do something for youth/families.</p> <p>3. Lack of funds</p>

3. Positive youth connection to adults	<ol style="list-style-type: none"> <li>1. LCC partner shares Developmental Asset messaging through the community via social media and other outlets.</li> <li>2. LCC encourages and participates in community activities.</li> <li>3. Promotes and provides resources as it pertains to family involvement and community involvement.</li> </ol>	<ol style="list-style-type: none"> <li>1. Lack of funds for programming/events.</li> <li>2. Lack of opportunities for youth and families to connect.</li> <li>3. Busy schedules and less interactions between youth and families.</li> <li>4. Lack of healthy active adults to engage with</li> </ol>
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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.*

Risk Factors	Problem Statement(s)
1. Availability of alcohol and other drugs	1. Cass County continues to have a problem with use, misuse and abuse of alcohol.



	<p>2. Cass County continues to have a problem with use of marijuana.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>
2. Family substance use	<p>1. Cass County continues to have a problem with use, misuse and abuse of alcohol.</p> <p>2. Cass County continues to have a problem with use of marijuana.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</p>
3. Limited prevention and recovery resources	<p>1. Cass County continues to have a problem with use, misuse and abuse of alcohol.</p> <p>2. Cass County continues to have a problem with use of marijuana.</p> <p>3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.</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).*

*Abbreviations: Cass County Alcohol & Drug Court Program (CCADCP), Logansport Police Department (LPD), Cass County Sheriff's Department (CCSD), Bowen Center (BC), Cass County Juvenile Probation Dept (CCJPD), Cass Pulaski Community Corrections (CPCC), Snyder Counseling (SC), Community Health Needs Assessment Report (CHNA) Indiana Youth Institute (IYI) All data is from January 1-Dec 31, 2021.*

Problem Statements	Data That Establishes Problem	Data Source
1. Cass County continues to have a problem with use, misuse and abuse of alcohol.	<ul style="list-style-type: none"> <li>47% of cases were directly related to alcohol at SC/CCADCP</li> <li>There were 45 DUI (alcohol related) arrests. 9 Public Intox</li> </ul>	<ul style="list-style-type: none"> <li>Snyder Counseling</li> <li>Logansport Police Department</li> <li>Cass County Sheriff's Department</li> </ul>

	<p>and 5 Minor Consumption of alcohol related arrests. (CCSD)</p> <ul style="list-style-type: none"> <li>• 81.8% of the children removed from the home in Cass County (2019) was due to parent drug/alcohol abuse. (IYI)</li> <li>• Operating while Intoxicated arrests: 121 arrests. (LPD)</li> <li>• When asked to pick 3 substances; 55% of 189 surveyed thought alcohol was one of the largest abused substances in Cass County. (LCC online Survey 2021)</li> <li>• 1 out of 30 referrals(19 adult, 11 children) made are for alochol dependency. (BC)</li> </ul>	<ul style="list-style-type: none"> <li>• LCC Community Perception Survey</li> <li>• Bowen Center</li> </ul>
2. Cass County continues to have a problem with use of marijuana.	<ul style="list-style-type: none"> <li>• When asked to pick 3 substances; 57.8% of 189 surveyed thought marijuana was one of the largest abused substances in Cass County. (LCC online Survey 2021)</li> <li>• Marijuana accouts for 9% on probation (44% reported marijuana as a secondary issue) according to SC/CCADCP</li> </ul>	<ul style="list-style-type: none"> <li>• LCC Community Perception Survey</li> <li>• Snyder Counseling</li> <li>• Cass County Juvenile Probation Department</li> <li>• Loganstport Police Department</li> <li>• Cass County Sherri's Department</li> <li>• Bowen Center</li> </ul>

	<ul style="list-style-type: none"> <li>• Pretrial diversion referrals for marijuana was 58% (33 of 55) of total pretrial referrals according to SC/CCADCP</li> <li>• Possession of Marijuana: 139 arrests. (LPD)</li> <li>• 47 Possession of Marijuana arrests were made by the CCSD</li> <li>• 10 arrests were charged with dealing of marijuana by CCSD</li> <li>• 81.8% of the children removed from the home in Cass County (2019) was due to parent drug/alcohol abuse. (IYT)</li> <li>• 21 juveniles were placed on Formal Probation Supervision CCJPD for Substance Abuse related arrests. (CCJPD)</li> <li>• 6 juveniles were placed on Informal Adjustment with CCJPD for Substance Abuse arrests. (CCJPD)</li> </ul>	
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	<ul style="list-style-type: none"> <li>• There were 29 drug /alcohol related offenses referred to CCJPD.</li> <li>• In juvenile probation there were 36 positive THC/marijuana screens for 2021. CCJPD</li> <li>• 2 out of 30 referrals (19 adult, 11 children) for cannabis dependency (BC).</li> </ul>	
3. Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.	<ul style="list-style-type: none"> <li>• 21 juveniles were placed on Formal Probation Supervision CCJPD for Substance Abuse related arrests.</li> <li>• 6 juveniles were placed on Informal Adjustment with CCJPD for Substance Abuse arrests.</li> <li>• There were 29 drug /alcohol related offenses referred to CCJPD.</li> <li>• 81.8% of the children removed from the home in Cass County (2019) was due to parent</li> </ul>	<ul style="list-style-type: none"> <li>• LCC Community Perception Survey</li> <li>• Cass County Juvenile Probation Dept.</li> <li>• Cass County Coroner</li> <li>• Cass County Sheriff's Department</li> <li>• Community Health Needs Assessment Report</li> <li>• Indiana Youth Institute County Snapshot data</li> </ul>

	<p>drug/alcohol abuse. (IYI)</p> <ul style="list-style-type: none"> <li>• Possession of drugs (other than marijuana) accounted for 41 arrests by CCSD.</li> <li>• Dealing of drugs other than marijuana accounted for 12 arrests by CCSD.</li> <li>• There were 6 possession of syringe arrests by CCSD.</li> <li>• There continues to be a rise in Opioid related deaths, in 2021 there were 8 reported overdose deaths in Cass County due to Opioids or meth. (Cass County Coroner)</li> <li>• There were 3 DUI “other” drug arrests, 41 possession of “other” drug, and 12 dealing of “other” drug. (CCSD)</li> <li>• There were 6 possession of a syringe arrests. (CCSD)</li> <li>• According to 2019 CHNA for Cass County, 36.5% of</li> </ul>	
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	<p>survey respondents indicate that their lives have been negatively affected by substance abuse, including 3.3% who reported “illicit drug use” in the past month.</p> <ul style="list-style-type: none"> <li>• Opioid referrals were 7% (generally opioid convictions go to prison and are not seen by CCADCP) (SC).</li> <li>• Possession of a syringe accounted for 3% of referrals. (SC)</li> <li>• Methamphetamines referrals accounted to 23% of referrals. (SC)</li> <li>• 6 referrals out of 30 (19 adult, 11 children) referrals were for opioid or other stimulant disorder. (BC)</li> </ul>	
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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)?
1.Cass County continues to have a problem with use, misuse and abuse of alcohol. Both youth and adult problems.	<p>1. To decrease the amount of adult arrests by 2% in the next three years.</p> <p>2. To increase awareness of risk to both juvenile and adult population by 2% in the</p>

	<p>next three years as indicated by annual community surveys conducted by the LCC.</p> <p>3.To have cooperation from each of the local school corporations with LCC members and organizations; to allow implementation for alcohol and drug awareness education.</p> <p>4.To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.</p>
2.Cass County continues to have a problem with use of marijuana.	<p>1. Increase family/parent education on marijuana use.</p> <p>2. Sustain or add to the number of treatment and prevention services focusing on marijuana and its affects.</p> <p>3. Increase family/parent education on marijuana use.</p> <p>4.To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.</p>
3.Cass County has had a steady rise with opioid misuse and abuse, which has been known to lead to hospitalization or death.	<p>1. Sustain or add to the number of treatment and prevention services focusing on opioid abuse and misuse.</p> <p>2. Increase family/parent education on prescription drug safety, through educating on locking meds and RX days that may be available in community.</p> <p>3.Collect and track data for Cass County as it becomes more available.</p> <p>4.To increase LCC Community Outreach and resource distribution, by participating in local events and partnering with other agencies in the community.</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
Goal 1 Support programming with a focus on risks of alcohol and other drug use and abuse in order to lower the monthly use percent by .25% biennially, as reported on the INYS.
Goal 2 To increase awareness of risk to both juvenile and adult population by 2% in the next three years as indicated by annual community surveys conducted by the LCC and partners.
Problem Statement #2
Goal 1 Sustain or add to the number of treatment and prevention services focusing on marijuana and its affects. See results reflected on LCC community survey each year.
Goal 2 Provide educational presence and continue community surveys throughout our community.
Problem Statement #3
Goal 1 Collect and track data for Cass County as it becomes more available. Request data and adjust goals as needed.
Goal 2 Participate/ be available for school programs/clubs such as S.A.D.D. groups in local high schools and participate in school programming for elementary school. Increase or maintain school participation each year.

#### Step 5: Plans to Achieve Goals

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

Problem Statement #1	Steps
Goal 1 Support programming with a focus on risks of alcohol and other drug use and abuse.	1. Supplement funding for organizations to provide programming.  2. Continue communicating/partnering with



	<p>organizations that provide programming.</p> <p>3. Explore new ways to provide programming.</p>
<p>Goal 2</p> <p>To increase awareness of risk to both juvenile and adult population by 2% in the next three years as indicated by annual surveys conducted by the LCC.</p>	<p>1. Supporting/partnering with organizations to provide programming to educate on the risks of alcohol use.</p> <p>2. Participate in local events to provide resources to the community.</p> <p>3. Work within schools to educate students on the risk alcohol use has on them.</p>
<b>Problem Statement #2</b>	<b>Steps</b>
<p>Goal 1</p> <p>Sustain or add to the number of treatment and prevention services focusing on marijuana and its affects.</p>	<p>1. Help provide funds for translated services for treatment and prevention services.</p> <p>2. Provide funds or supplement funds for prevention programming.</p> <p>3. Participate in local events and provide resources and information on prevention and treatment.</p>
<p>Goal 2</p> <p>Provide educational presence and continue annual survey throughout our community.</p>	<p>1. Partner with schools to provide resources.</p> <p>2. Examine our LCC community survey yearly to update or change requested information to reflect our community's needs.</p> <p>3. Participate in local events and provide resources and information.</p>
<b>Problem Statement #3</b>	<b>Steps</b>

<p>Goal 1</p> <p>Collect and track data for Cass County as it becomes more available.</p>	<ol style="list-style-type: none"> <li>1. Check with local entities for new or updated data.</li> <li>2. Keep updated on new and updated data that is provided via the web.</li> <li>3. Share data with our community as we collect it.</li> </ol>
<p>Goal 2</p> <p>Participate/ become available for school programs/clubs such as S.A.D.D. groups in local high schools and participate in school programming for elementary school.</p>	<ol style="list-style-type: none"> <li>1. Actively communicate/partner with schools to bring much needed resources.</li> <li>2. Support local organizations that are providing programming in schools.</li> <li>3. Join already existing efforts/organizations in the schools by providing resources for distribution.</li> </ol>

## 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		
<b>1</b>	Amount deposited into the County DFC Fund from fees collected last year:	\$39,044.06
<b>2</b>	Amount of unused funds from last year that will roll over into this year:	\$4,107.37
<b>3</b>	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$43,151.43
<b>4</b>	Amount of funds granted last year:	\$36,276.85
Additional Funding Sources (if no money is received, please enter \$0.00)		
<b>A</b>	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
<b>B</b>	Centers for Disease Control and Prevention (CDC):	\$0.00
<b>C</b>	Bureau of Justice Administration (BJA):	\$0.00
<b>D</b>	Office of National Drug Control Policy (ONDCP):	\$0.00
<b>E</b>	Indiana State Department of Health (ISDH):	\$0.00
<b>F</b>	Indiana Department of Education (DOE):	\$0.00
<b>G</b>	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00
<b>H</b>	Indiana Family and Social Services Administration (FSSA):	\$0.00

<b>I</b>	Local entities:	\$0.00
<b>J</b>	Other:	\$0.00
<b>Categorical Funding Allocations</b>		
Prevention/Education: \$10,787.86	Intervention/Treatment: \$10,787.86	Justice Services: \$10,787.86
<b>Funding allotted to Administrative costs:</b>		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation: coordinator went unpaid from Jan-March 2022, because we had adjusted our calendar year to match ICJI. Therefore the coordinator salary reflects a slight increase each month to make up for that.		\$9,750
Office supplies/events		\$1,037.85
<b>Funding Allocations by Goal per Problem Statement:</b>		
<b>Problem Statement #1</b>	<b>Problem Statement #2</b>	<b>Problem Statement #3</b>
Goal 1: \$3550	Goal 1: \$1175	Goal 1: \$5258.33
Goal 2: \$6391.67	Goal 2: \$4141.97	Goal 2: \$3958.33