

Hendricks County  
Behavioral Health and Substance Use

# Community Action Plan

December 2022



Produced by:  
Community Solutions, Inc.

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## Overview

Hendricks County is the ninth most populated county in Indiana<sup>1</sup> and yet is a designated mental health professional shortage area<sup>2</sup>. Mental health and substance use consistently appear at the top of the list of needs for Hendricks County. They rated as the top needs in all of the Community Health Assessments for hospitals that serve Hendricks County. They are also cited as top needs by people who responded to the Hendricks County Community Needs Assessment surveys administered in both 2019 and 2022.

These needs are being addressed by the Hendricks County Health Partnership (Health Partnership). The two current projects of the health partnership are the Mental Health and Wellness Coalition and the Substance Use Task Force. The Health Partnership is also responsible for the creation and promotion of the Community Resource Guide which includes multiple community resources, from basic needs to substance use, mental health, and other behavioral health services that are available to Hendricks County residents.

The Hendricks County Community Foundation (The Foundation) works closely with the Health Partnership. When The Foundation received American Rescue Plan Act (ARPA) funds, they decided to use a portion of the money to work with the Health Partnership to develop a Mental Health and Substance Use Plan. This collaborative planning process laid the groundwork to strategically move from talk to action by developing a *Hendricks County Behavioral Health and Substance Use Community Action Plan* (Community Action Plan) to ensure Hendricks County residents, regardless of race, place, or identity, have access to the behavioral health and substance use services to be mentally healthy, free of addiction, or on a path to recovery.

The Community Action Plan provides strategies for partners to work together in service of this shared result. The Foundation has \$300,000 in additional ARPA funding to make grants to support the implementation of the Community Action Plan.

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<sup>1</sup> Stats Indiana, [https://www.stats.indiana.edu/population/popTotals/2021\\_cntyest.asp](https://www.stats.indiana.edu/population/popTotals/2021_cntyest.asp)

<sup>2</sup> Robert Wood Johnson, County Health Rankings

## Acknowledgments

The development of the Community Action Plan was supported by the Hendricks County Community Foundation and led by a Steering Committee of cross-sector leaders in education, public safety, government, business, health care, and behavioral health. Technical support was provided by Community Solutions, Inc. This plan would not have been possible without the support of Hendricks County Commissioners, the Hendricks County Council, and the ARPA funds awarded to The Foundation.

Steering Committee co-chairs Eric Hessel, Vice President of Programs for The Foundation, and Chase Cotten, Community Director for the Willow Center and Vice Chair of the Health Partnership brought a wealth of community knowledge and insight to the planning process. Michael Aviah, Public Health Education specialist from the Hendricks County Health Department provided critical public survey data drawn from his work leading the 2022 Hendricks County Community Needs Assessment.

Steering Committee leaders were keenly aware of the amount of work and planning that has been done on various pieces of this issue and recognize that there are many organizations and institutions in the community working to address the mental health and substance use needs of the community. They endeavored to lead a process that would result in a coordinated, implementable plan with a clear result and key indicators that the community can use to monitor and measure progress. They also sought to build on the success of existing efforts and initiatives, connect sector-focused initiatives, and develop new strategies to fill any gaps. Ultimately, they are seeking to have a population-level impact.

The following individuals are recognized for their contribution to the Steering Committee and their commitment to implementing the plan:

**Michael Aviah**, *Public Health Education Specialist*, Hendricks County Health Dept.

**April Bordeau**, *Executive Director*, Care to Change Counseling/Mental Health & Wellness Coalition

**Bridgette Collins-George**, *Work Release Director*, Hendricks County Community Corrections

**Chase Cotten**, *Community Director*, the Willow Center

**Dennis Dawes**, *County Commissioner*, Hendricks County Government

**Christa Detzel**, *Coordinator*, Substance Abuse Taskforce

**Krista Fay**, *Mental Health Wellness*, Avon Community School Corporation

**Chris Flegal**, *Community Relations Director*, United Way of Central Indiana

**Michelle Freeman**, *Director of County Operations*, Cummins Behavioral Health Systems

**Aaron Garner**, *Marketing Technologist*, Hendricks County Systems of Care/Tetra Prime Consulting

**Brittany Gipson**, *Director of Clinical Operations*, Care to Change Counseling

**Eric Hessel**, *Vice President of Programs*, Hendricks County Community Foundation

**Lael Hill**, *Executive Director*, MHA of Hendricks County

**Marina Keers**, *Executive Director*, Hendricks County Senior Services  
**Evan Love**, *Sergeant*, Hendricks County Sheriff's Department  
**Ann McCafferty**, *Project Coordinator & Indiana Navigator for the Centers for Medicare & Medicaid Services- Connecting Kids to Coverage program*, Indiana Rural Health Association  
**Trisha Palencer**, *Director of the Addiction Treatment & Recovery Center*, IU Health West Hospital  
**Tim Parsons**, *Lead Pastor*, The Journey Church  
**Jennifer Ramey**, *Director of Business Development*, Hendricks Behavioral Hospital  
**Julie Randall**, *Executive Director*, Family Promise of Hendricks County  
**Jean Renk**, *Government & Community Relations Manager*, Duke Energy  
**Shane Sommers**, *Vice President of Professional Services*, Hendricks Regional Health  
**Deb Swain-Bayless**, *School Safety Coordinator*, Avon Community School Corporation

The Steering Committee would also like to thank the individuals, some chose not to be named, for their participation in the community meeting that developed the strategies in this plan:

**Christina Anderson**, *Owner/Therapist*, New Strength Counselling LLC  
**Stephanie Anderson**, *Vice President of Strategic Initiatives & Quality Assurance*, Mental Health America of Indiana  
**Nita Berlyn**, *Resident*  
**Jeff Corder**, *Public Health Preparedness Coordinator*, Hendricks County Health Department  
**Katy Cummings**, *Executive Director*, Parks Foundation of Hendricks County  
**Christina Dorton**, *Director of Sales*  
**LaDonna Everroad**, *Chief Operating Officer*, Sycamore Services, Inc.  
**Jesseca Hartman**, *Director of Clinical Operations*, Damar Services  
**Khepri Hazel**, *Development Director*, Jameson Camp  
**Rob Hovermale**, *Lead Pastor*, Mercy Base Church  
**Karla Janning**, *Board President*, Hendricks Civic Theater  
**Jess Gillum, MPH**, *Program Director*, Jameson Camp  
**Mary Jones**, *Senior Director Basic Needs*, United Way of Central Indiana  
**Christa Lake**, *ABA Clinical Director*, Sycamore Services  
**Shirley Larsen**, *Treasurer*, Hendricks County Food Pantry Coalition  
**Jessica Ledford**, *District Vice President*, Hendricks Regional Health YMCA  
**Rebecca Maners**, *A/R Credit Manager*  
**Daniel Maxwell**, *Sergeant*, Hendricks County Sheriff's Department Jail  
**Ashley Maynard**, *Suicide Prevention Coordinator*  
**Jena Morrison**, *Executive Director*, Leadership Hendricks County  
**Ryan Morrison**, *Lead Pastor*, The Well Community Church  
**Natalie Phillips, BSW**, *Community Liaison*, Firefly Inc.

**Chris Ponsler**, *Assistant Director*, Hendricks College Network

**Jack Sadler**, *Captain*, Hendricks County Sheriffs' Department

**Melaney Sargent**, *Resident*

**Molly Smith**, *Executive Director*, Child Care Answers

In addition to the Steering Committee and the public meeting, several members of the Steering Committee gathered individuals representing a cross-section of the community for seven information-gathering sessions focused on the question, “what works to improve mental health and substance use?” These seven sessions lifted the voices of 80 people who shared information about what does and does not work to improve mental health and substance use in Hendricks County. While their participation is anonymous, their insight was a very important step in the development of this plan, thanks to each for their time and knowledge.

## Plan Development

Over the course of five months, the Steering Committee met monthly to lay the foundation for the Community Action Plan using a Results Based Accountability (RBA) Framework. This data-driven, results-focused decision-making process provides a commonsense framework that allows diverse stakeholders to leverage their individual efforts, quickly move from talk to action, and make measurable change in their communities. During these sessions which were held between July and November of 2022, the Steering Committee engaged in dialogue to:

- develop a common agenda by adopting a shared result statement,
- select indicators of success,
- develop a common understanding of the story behind the indicator data
- engage stakeholders in input sessions to explore what works
- host a community meeting to develop powerful strategies based on best practices, and
- lay the groundwork to strategically and collaboratively move from talk to action.

## Developing a Shared Understanding

It is important to start with a shared understanding of the work to be done and a shared commitment to the result to be achieved. A result statement is a community-level condition of well-being that is future-oriented, communicates what the group wants for the community, is easily understood by people outside the group, and is inspiring to the broader community.

Using Proposal Based Decision-Making, stakeholders at the initial Steering Committee meeting identified the following result:

**All people in Hendricks County are mentally healthy, free of addiction, or on a path to recovery.**

## Identifying Indicators

The data used in RBA – “indicators” – display population-level trends over time to indicate what the condition of well-being has looked like historically and identify whether the efforts of the group are bringing the community closer to the result they hope to achieve. There are two types of indicators:

- Primary indicators are population-level measures that can be easily understood by the community, are representative of broader issues, and are timely and trustworthy. The assumption is that if the primary indicators are going in a positive direction, other indicators will follow.

- Secondary indicators are other population-level data that help identify whether there are subpopulations or groups not experiencing equal well-being, interim milestones that may be lagging, or provide other key data that is helpful in measuring progress toward the result.

Performance measures use program-level data to demonstrate the impact that efforts are having on systems, organizations, programs, and services. They help to identify how much intervention, program, or service is being delivered (how many people are being served); how well that intervention, program, or service is being delivered (quality of service delivery); and whether anyone is better off as a result (the ultimate goal). Performance measures do not measure progress toward the community wide result but serve as benchmark data to identify whether strategies are having the desired reach and impact.

During the first phase of the process, Community Solutions gathered and analyzed data and information to support the planning process. The resulting Hendricks County Data Resource Assessment (Data Resource) included an epidemiological profile of Hendricks County, an environmental scan of behavioral health programs and services located in Hendricks County, and the Hendricks County Community Survey Results (Appendix A). It is important to note that the Needs Assessment is not inclusive of all services and supports that may be active in Hendricks County as it is limited by the availability of data and level of information provided through public data systems.

After reviewing community-level data, discussing the reliability and validity of data sources and the factors that cause the data to move in one direction or another, the Hendricks County Steering Committee identified the following primary indicators:

1. Overall decrease in overdose deaths
2. Decrease in overdose non-fatal events
3. Lower number of self-reported low mental health days

Data gathered through the Needs Assessment was used throughout the planning process to identify strategic priorities, target specific populations or geographic areas, identify partners, and guide decision-making in the development of strategies. The data will continue to be useful in the ongoing monitoring of progress, re-design of strategies, and assessment of the impact on the community.

## What Works

Once the Result Statement and key indicators were selected, the Steering Committee met to begin planning for the community input sessions. The following process was developed to gather input on strategies led by Steering Committee members, they would:

- Serve as facilitators with small groups of individuals with whom they come into contact in their respective roles to conduct input sessions.

- Identify whom to invite and use the tools provided by Community Solutions to facilitate the discussions.
- Record composition of the group(s) and input received from them.
- Request anonymous demographic information from participants
- Offer follow-up forms for participants to indicate whether they would like to be acknowledged in the final report and/or if they would like to receive the report.

Resource packets with all materials needed to facilitate and complete the input sessions were prepared by Community Solutions. Steering Committee members completed Action Commitment Forms to indicate how many people they expected to speak with. The Foundation took part in this process as well, agreeing to engage specific groups of communities of color and immigrants. Steering Committee members were able to get What Works information from 80 individuals, this is many more than would likely attend a community meeting and the information they shared was much deeper than anyone would likely share in a public meeting. Of those who participated in What Works sessions:

- 6 were senior citizens
- 29 were engaged in the justice system
- 5 were in long-term recovery
- 11 were in long-term recovery for a substance use disorder
- 8 worked in the behavioral health field
- 15 were from the general public (did not indicate any additional affiliations)
- 6 participants did not provide any group identification (race, age, gender, etc.)
- Of the 29 who indicated, 17 identified as female, and 18 identified as male
- Most participants identified as white (89%), while 8% identified as Black and 3% identified as other. No one indicated Hispanic as their ethnicity.

A summary of stakeholder input generated during the What Works sessions is included in Appendix B.

## Strategy Development

With data and stakeholder input in hand, the Steering Committee convened 37 providers and other community representatives in a half-day planning session in October 2022. Facilitators presented an overview of Hendricks County data, the RBA framework, and the summary of stakeholder input on What Works and were then asked to identify the gaps and change ideas from the What Works session summary (Appendix B).

Following the identification of gaps and change ideas, attendees were asked to turn the change ideas into strategies and action steps that could lead to the result: All people in Hendricks County are mentally healthy, free of addiction, or on a path to recovery. Meeting participants then voted to prioritize the strategies:

1. Hendricks County system of navigators for system of substance use and trauma.
2. Prioritize mental health for kids in schools.
3. Advocate the ‘why’ to those who can have an impact on overall health and economic growth of the community (i.e., county officials, Chambers of Commerce, etc.).
4. It takes a village- support for people raising children.
5. Increase the number of behavioral health workers.
6. Encourage the build out of sober living facilities.
7. Destigmatize mental health support for public servants.
8. Reduce barriers to providers accepting Medicaid.
9. Engaging faith-based communities.
10. Make trauma-informed care and adverse childhood experiences part of the culture.
11. Address red tape laws.
12. Use the arts to start mental health/substance use addiction conversations.
13. Open a rape crisis services center in Hendricks County.

The strategies included in the Community Action Plan were further refined by the Steering Committee. While they appreciated all the strategies recommended in the community meeting, they felt that some were beyond the scope of this plan. They also grouped the strategies into four objectives

Provider Access	Isolation and Stigma
Education and Awareness	Social-Emotional Development

The finalized strategies are included in the Strategies section of this plan.

## Identifying Partners

The Steering Committee reviewed, edited, and finalized the strategies and refined them to include action steps, partners, timeline, and performance measures. The following lead and supporting partners were identified by objective:

### Provider access/patient navigation

*Lead Partners:*

- Hendricks County Family Promise
- Stability Workers Network
- Hendricks College Network

*Supporting Partners:*

- Emergency Medical Services
- First Responders
- Hendricks County Health Department
- Faith-Based Community

- Hendricks County Employers
- Hendricks County Care Providers
- Hendricks County Schools
- Social Workers
- The Hendricks County Community Foundation
- Area 31 at Ben Davis

## Isolation and stigma

### *Lead Partners:*

- Mental Health America of Hendricks County
- Hendricks County Community Foundation
- Care to Change

### *Supporting Partners:*

- Hendricks County Employer Human resources departments
- Employee Assistance Plan Providers
- Department leadership at employers
- Indiana Counselors Association on Alcohol and Drug Abuse
- Mental Health America of Indiana
- Hendricks County Crisis Response Team
- Faith-based community
- School superintendents
  - Local substance abuse groups
  - Groups that provide services and funding

## Awareness/education

### *Lead Partners:*

- The Hendricks County Health Partnership
- Hendricks County Phoenix Collective, Hendricks County Arts Council

### *Supporting Partners:*

- The Hendricks County Health Department
- Hendricks County Employers and Human Resource Departments
- Hendricks County Schools
- Hendricks County Care Providers
- Hendricks County Apartment Complexes
- Hendricks County Policy Makers (Township Trustees, County Council, Commissioners, Town Leaders)
- Hendricks County Human Resources Advocates/Professional Group
- Hendricks College Network
- Hendricks County, Chambers of Commerce

- Hendricks County Economic Development
- Hendricks County Civic Theater
- Hendricks County Symphony
- Hendricks County Choirs
- Plainfield Performing Arts Center
- Hendricks Live

## Moving from Talk to Action

The Health Partnership will provide oversight of the implementation of the Community Action Plan. The Health Partnership seeks to improve the health and wellness of all Hendricks County residents through education, advocacy, and collaboration. They have demonstrated leadership in building cross-sector alliances focused on expanding the availability and accessibility of behavioral health and substance use disorder services for Hendricks County residents. The Foundation has designated the remaining \$300,000 in ARPA funds to assist with the implementation of the Community Action Plan. The Health Partnership will collaborate with The Foundation using this plan to guide the award of these funds.

## Community Action Plan

When The Foundation received an American Rescue Plan Act (ARPA) Grant, awarded to them by the Hendricks County Commissioners and the Hendricks County Council, they decided to use a portion of the funds to work with the Health Partnership and other leaders throughout the county to develop the *Hendricks County Behavioral Health and Substance Use Community Action Plan* (Community Action Plan) to ensure All people in Hendricks County are mentally healthy, free of addiction, or on a path to recovery, regardless of race, place, or identity.

The Community Action Plan provides strategies for partners to work together to make progress in achieving this shared result. The plan also highlights opportunities to connect systems to increase the accessibility of behavioral health and substance use disorder services. When this work began, system partners in Hendricks County had already been working together as the Hendricks County Health Partnership, building cross-sector alliances focused on expanding the availability and accessibility of behavioral health and substance use disorder services for Hendricks County residents, including those whose unmet needs which lead to involvement with the criminal justice system. The goal of the collaborative planning process was to build on the work that had already begun to provide a comprehensive plan that crosses sectors and has an intentional focus on often disconnected populations.

This collaborative planning process laid the groundwork to strategically move from talk to action by developing a Community Action Plan to ensure Hendricks County residents, regardless of race, place, or identity, have access to the behavioral health and substance use services they need to be mentally healthy, free of addiction, or on a path to recovery. The planning process was rooted in data and included five Steering Committee meetings, eight community-focused what works sessions, and one community-wide meeting targeting professionals who deal most with mental health and substance use disorders. This culminated in the prioritization of strategies to address the highest-priority needs of the county.

The Community Action Plan will serve guide and focus the efforts of the Hendricks County Health Partnership. It provides a tool for the Health Partnership to refine the strategies as needed, monitor strategy implementation, and provide ongoing management to achieve the intended result. The Foundation has designated the remaining \$300,000 in ARPA funds to support plan implementation. It is expected that the Hendricks County Health Partnership will collaborate with the Foundation using this plan to guide the award of these funds.

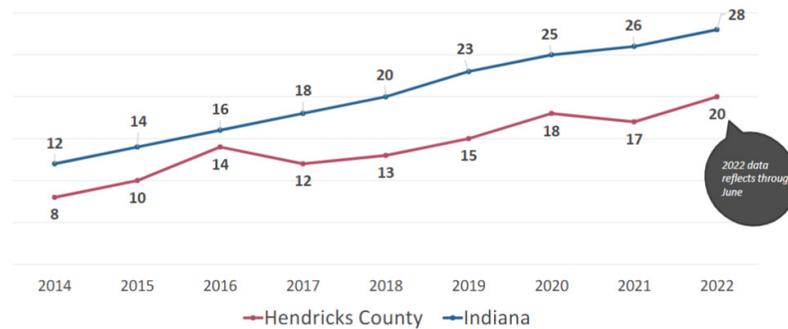
## Result

All people in Hendricks County are mentally healthy, free of addiction, or on a path to recovery.

## Primary Indicators

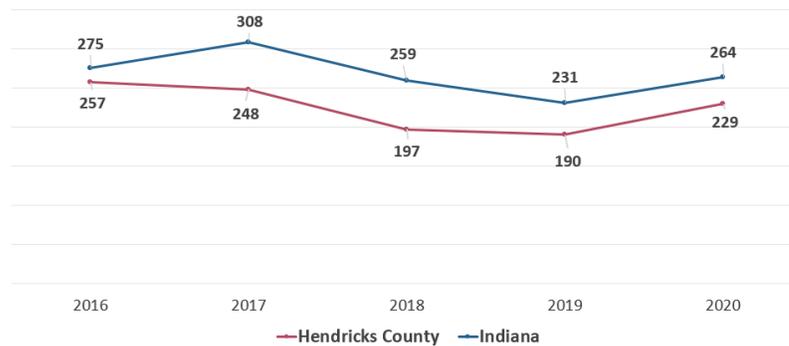
1. Overall decrease in overdose deaths

### Deaths involving drug overdose, per 100,000 population, 2014-2022



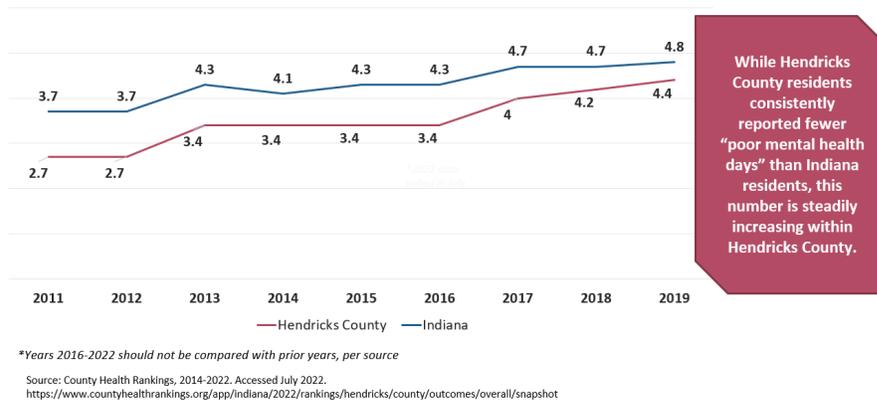
2. Decrease in overdose non-fatal events

### Emergency room visits due to any drug, per 100,000 population, 2016-2020



### 3. Lower number of self-reported low mental health days

#### Self-reported number of poor mental health days per month, 2011-2019\*



## Secondary Indicators

In addition to the primary indicators that represent the community-level condition of well-being and can be used to measure progress toward the result over time, leaders identified multiple secondary indicators that can be used to track strategy-level impact, including:

- Ratio of mental health providers to population
- Suicide Rate
- TEMS incidence where Naloxone was administered
- Kids removed from home due to parent alcohol/substance use
- Student suspensions/expulsions for alcohol, tobacco or drug use
- Substance use treatment episodes
- Number of providers in the county
- Number of mental health and substance use disorder navigators
- Faith leaders trained in mental health and substance use disorders
- Employee Assistance Plans available by employer
- Resource guide “click-throughs” to providers
- Trauma-informed care and Adverse Childhood Experiences workshops
- Arts events focused on mental health and substance use disorders

## Strategies

A wide range of issues emerged during the What Works sessions. (Appendix B) Many of the social determinants of health are also contributors to mental health and substance use disorders. Participants mentioned lack of affordable or adequate housing, lack of well-paying jobs, family stress, trauma (including childhood and domestic violence), financial stress, lack of transportation, and lack of insurance as things that threaten mental health and drive substance use disorders. While the Steering Committee agreed that these issues are of great

concern, they did not think they had the right partners to address those larger social issues. Instead, they opted to develop strategies that would have a more direct impact on their four priority areas: **provider access, isolation and stigma, education and awareness, and social-emotional development.**

## Provider Access

Hendricks County is a designated mental health professional shortage area. In 2021 there was only 1 mental health provider for every 920 people in the county compared to the state which has one provider for every 560 people.<sup>3</sup>

<b>Strategy:</b> Increase the number of behavioral health workers in Hendricks County		
<b>Lead Partner(s):</b> Hendricks College Network		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Identify grant funding for paid internships at behavioral health agencies	Hendricks County Community Foundation	By end of 2025
Add behavioral health career education for high school students	Area 31@Ben Davis	By end of 2023
Add behavioral health career education to the Hendricks College Network’s new student career pipeline website	Hendricks College Network	By end of 2023
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Ratio of behavioral health providers per 100,000 people in Hendricks County</li> <li>• Increased college enrollment in behavioral health degrees</li> <li>• Being removed from the national shortage list</li> </ul>		

<sup>3</sup> Hendricks Regional Health Community Health Needs Assessment, 2021.  
[https://www.hendricks.org/upload/docs/AboutUs/CHNA/2021\\_HRH\\_CHNA%20FINAL.pdf](https://www.hendricks.org/upload/docs/AboutUs/CHNA/2021_HRH_CHNA%20FINAL.pdf)

<b>Strategy:</b> Create a Hendricks County system of navigators to assist in prevention efforts and assist people to better maneuver through the mental health and substance use treatment options		
<b>Lead Partner(s):</b> Hendricks County Family Promise and Stability Workers Network		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Define the role of system navigators for mental health, substance use and trauma including what areas will navigation focus on first (healthcare, mental healthcare, substance use care, trauma care), whether they will start small and grow, and which client population(s) they will serve (is there an economic or demographic focus)	Hendricks County Family Promise	2023-2023
Identify systems that are currently in place and working	Emergency Medical Services, First Responders	2023
Leverage the existing systems	Emergency Medical Services, First Responders	2024-2027
Determine a roll-out process for integrating navigators into the Hendricks County system of care for mental health, substance use, and abuse prevention and treatment.	Hendricks County Family Promise	2023-2023
Establish funding to create a network of navigators who work collectively and independently to resource and leverage sectors such as the Health Department, Faith Based	Health Department, Faith-Based Community	2024-2026
House navigators at a specific location in several geographical locations through the expansion of Family Promise offices and shelters	Family promise network	2024-2026

Market the new patient navigator system and process to local care providers, social workers, schools, employers, etc. to help create multiple routes for clients to get help when help is needed.	HCHP, Employers, Care Providers, Schools, Social Workers	2024-2026
<p><b>Proposed Performance Measures:</b></p> <ul style="list-style-type: none"> <li>• Funding obtained</li> <li>• Number of navigators hired</li> <li>• Number of clients helped per patient navigator, community health worker, trained volunteer, or Patient Review Coordination</li> </ul>		

## Isolation and Stigma

In a 2016 book entitled, *Ending Discrimination Against People with Mental Health and Substance Use Disorders: The Evidence for Stigma Change*, the authors note that while the Community Mental Health Act of 1963 improved community level care by sparking a consumer movement for new models of care and recovery, public attitudes about mental health and substance use disorders have lagged. Despite the large number of people who experience mental health and substance use disorders, people seeking services for these problems still face stigma. Stigma can be structural, public, or individual. This stigma becomes isolating for individuals who try to hide their condition and/or avoid treatment.<sup>4</sup>

<b>Strategy:</b> Inform faith-based community about mental health and substance use disorders and get them involved in referring people to appropriate resources		
<b>Lead Partner(s):</b> Hendricks County Community Foundation and Care to Change		
Action Steps	Supporting Partner(s)	Timeline
Develop special interest committee for interfaith relations with a focus on mental health and substance use	Plainfield pastors meeting, Avon Pastors Meeting, Avon School Superintendent	By June 2023
Invite churches to participate in the committee for interfaith relations	Steering Committee, Care 2 Change roundtables, school superintendents, local substance abuse	2024-2025
Train pastors on the basic knowledge of mental health and signs of distress	Steering Committee, Care 2 Change roundtables, school superintendents	Nine a year 2023-2027
Make resources available to ministry leaders to assist walk-ins with housing help/bills	Anyone with services, funding, get cards to churches	January 2023

<sup>4</sup> National Academies of Sciences, Engineering, and Medicine. *Ending Discrimination Against People with Mental and Substance Use Disorders: The Evidence for Stigma Change*. Washington, DC: The National Academies Press; 2016. <https://doi.org/10.17226/23442>.

Host resource awareness fairs or workshops at places of worship	Churches in Hendricks County	2025-2027
<b>Proposed Performance Measures:</b> <ul style="list-style-type: none"> <li>• Number of ministers who know, advise, and understand mental health issues to help congregations and the community.</li> <li>• Coalitions formed</li> <li>• Number of annual pastor trainings per year</li> </ul>		

<b>Strategy:</b> Treat direct service professionals suffering from vicarious trauma by de-stigmatizing and creating access to mental health and substance use disorder providers that specialize in treatment for their professions, including but not limited to law enforcement, EMS, corrections, fire, ER dept. and healthcare workers, teachers and school staff, and any others who may serve victims of trauma and those experiencing mental health and substance use disorders directly or indirectly.		
<b>Lead Partner(s):</b> Mental Health America of Hendricks County		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Increase awareness of employee assistance program (EAP) vendors/therapists on the specifics of needs for population (diversity issues and understanding reflective of the workforce)	Human resources at the various departments and schools, EAP providers	2025-2027
Determine if direct service workplaces have EAPs	Human resources at the various departments, EAP providers	2024
Determine if direct service providers are utilizing EAPs	Human resources at the various departments, EAP providers	2024-2025

Develop peer support system and resource Increase relationships and trust building Incentivize treatment providers to create service programming	Department leadership, School leadership, Indiana Counselors Association on Alcohol and Drug Abuse, Mental Health America of Indiana	2025-2027
Continued Implementation and Maintaining of Crisis Incident Stress Management or Crisis Response Teams Include fire and emergency medical services within the Crisis Response Team	Hendricks County Crisis Response Team subcommittee	Ongoing
Encourage department leadership to reduce stigma around the use of EAPs including the threat of loss of privileges/duties	Department leadership	2025-2027
<p><b>Proposed Performance Measures:</b></p> <ul style="list-style-type: none"> <li>• Number of first responder agencies that have EAP available to their workforce</li> <li>• Number of first responders participating in EAP</li> <li>• Number of schools that have EAP available to their workforce</li> <li>• Number of teachers and staff participating in EAP</li> </ul>		

## Awareness and Education

According to a 2020 COVID Impact Mental Health Survey administered by the Hendricks County Health Partnership, 54% of respondents were either unsure or unaware of any mental health resources in Hendricks County. This is a strong indicator that there is a need within Hendricks County to raise awareness and provide education about mental health and substance use as well as to promote the resources available in the county. The Hendricks County Health Partnership is keenly aware of the need for awareness and education for the community and as a result, has created an Online Community Resource Guide that includes up-to-date information about services available to county residents.

<b>Strategy:</b> Maintain and promote the Hendricks County Online Community Resource Guide		
<b>Lead Partner(s):</b> Hendricks County Health Partnership		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Update, maintain and expand the Community Resource Guide	Hendricks County Health Partnership and Health Department	Ongoing 2023-2027
Market the Community Resource Guide so that behavioral and substance use services are normalized without attaching stigma	HCHP, Employers, Schools, Care Providers, Apartment Complexes	2024-2026
Work collectively with policymakers, and decision-makers that support and promote the resource guide	Decision Makers, Policy Makers	2023-2027
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Annual update of the resource guide</li> <li>• Number of hits and click-throughs on the Community Resource Guide</li> <li>• Number of referrals made via the Community Resource Guide (after new update is finished by Health Department)</li> </ul>		

<b>Strategy:</b> Engage and involve business leaders in the Hendricks County Health Partnership		
<b>Lead Partner(s):</b> Hendricks County Health Partnership		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Develop a team of employer trainers	Human Resources Advocates/Professional group	2023
Train 2-4 employers per year for five years	HR Advocates/Professional group	2024-2027
Engage employers/human resource leaders through the Human Resources Roundtable facilitated by the Hendricks College Network	HR Advocates/Professional group, Hendricks College Network	2023-2025
Engage economic development, Chamber leaders and businesses through awareness training during Mental Health Awareness Month and/or Recovery and Suicide Awareness Month	Chambers, Hendricks County Economic Development	2023- 2024
Become an annual or regular resource for Chambers of Commerce members – such as getting a link to the HC resource guide onto their pages and Facebook groups.	Hendricks County Health Partnership	Ongoing
Engage local and state government	Township trustees, county council, commissioners, town leaders	2024-2027
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Engage all chambers of commerce by 2024</li> <li>• Active engagement and communication</li> <li>• Messaging Creation</li> <li>• Recognition in planning and funding</li> </ul>		

<b>Strategy:</b> Make trauma informed care (TIC) and Adverse Childhood Experiences (ACES) awareness a culture throughout the county		
<b>Lead Partner(s):</b> Hendricks County Phoenix Collaborative		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Create educational opportunities and training on how to be trauma-informed	Hendricks County Health Partnership	2023-2027
Engage all public health and public corrections in ACEs training and ACEs screening	Hendricks County Health Partnership	By end of 2025
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Host four workshops per year for the next five years</li> </ul>		

<b>Strategy:</b> Use the arts organizations to start the mental health and drug addiction conversation		
<b>Lead Partner(s):</b> Hendricks County Arts Council		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Utilize artists to put together a gallery where the artwork deals with these issues	Hendricks County Arts Council, Care to Change	By end of 2024
Give free art and music classes to those in drug addiction therapy and mental health therapy	Hendricks County Arts Council, Care to Change	By end of 2023
Have performances that have mental health and drug addiction themes to deal with the social stigmas	Hendricks Civic Theater	2023-2024 season
Host free performances for mental health and drug recovery patients to come see	Hendricks Civic Theater	2023-2024 season
Pass out the mental health resources and drug rehab resources at our performances	Hendricks Civic Theater, Hendrick County Symphony, Hendricks County Choirs Plainfield Performing Arts Center, Hendricks Live	Immediately
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Number of shows and classes</li> <li>• Amount of marketing material for the art and music classes distributed to the drug rehab and mental health organizations</li> <li>• Number of patients that attend classes</li> </ul>		

## Social-Emotional Development

According to the National Association for the Education of Young Children (NAEYC), children who are socially and emotionally healthy are also mentally healthy, tend to be happier, and show a greater motivation to learn. Throughout the planning process, Steering Committee and community meeting participants expressed the need to get to younger people to work ‘upstream’ to prevent mental health and substance use issues before they begin.

<b>Strategy:</b> Provide support for people raising children in Hendricks County		
<b>Lead Partner(s):</b> Hendricks County Phoenix Collaborative		
<b>Action Steps</b>	<b>Supporting Partner(s)</b>	<b>Timeline</b>
Develop and execute accessible caregiver classes for new and experienced parents to support <u>healthier kids</u> , including child development and special needs children, and children of other minoritized identities.	Hendricks County Phoenix Collaborative, Hendricks Regional, Libraries, Leadership Hendricks County, Sycamore, Cummins, Damar, Care to Change	2023-2025
Create a page on the Hendricks County Online Community Resource Guide specifically related to parenting and caregiving resources.	Hendricks County Health Partnership, Childcare Answers, Firefly, Care to Change	2024
<b>Proposed Performance Measures:</b>		
<ul style="list-style-type: none"> <li>• Number of website visits/external links clicked</li> <li>• Number of caregivers attending PC’s workshops/classes</li> <li>• Long-term – lower expulsion and suspension rates, higher graduation rates and test scores, lower youth crime and drug use rates, more youth receiving services, higher employment rate</li> </ul>		

# **Appendix A: Hendricks County Data Resource Assessment (Data Resource)**

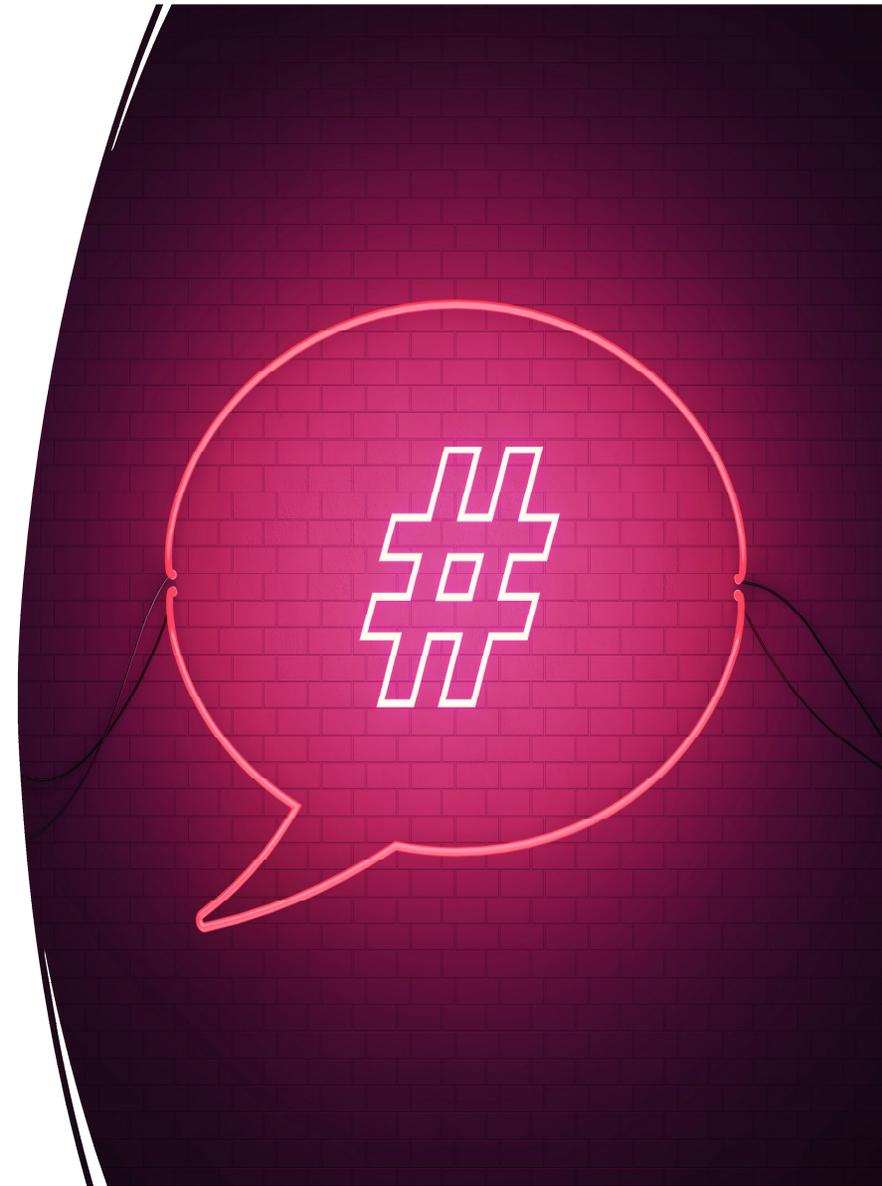
# Hendricks County Background Data

# Key Indicators

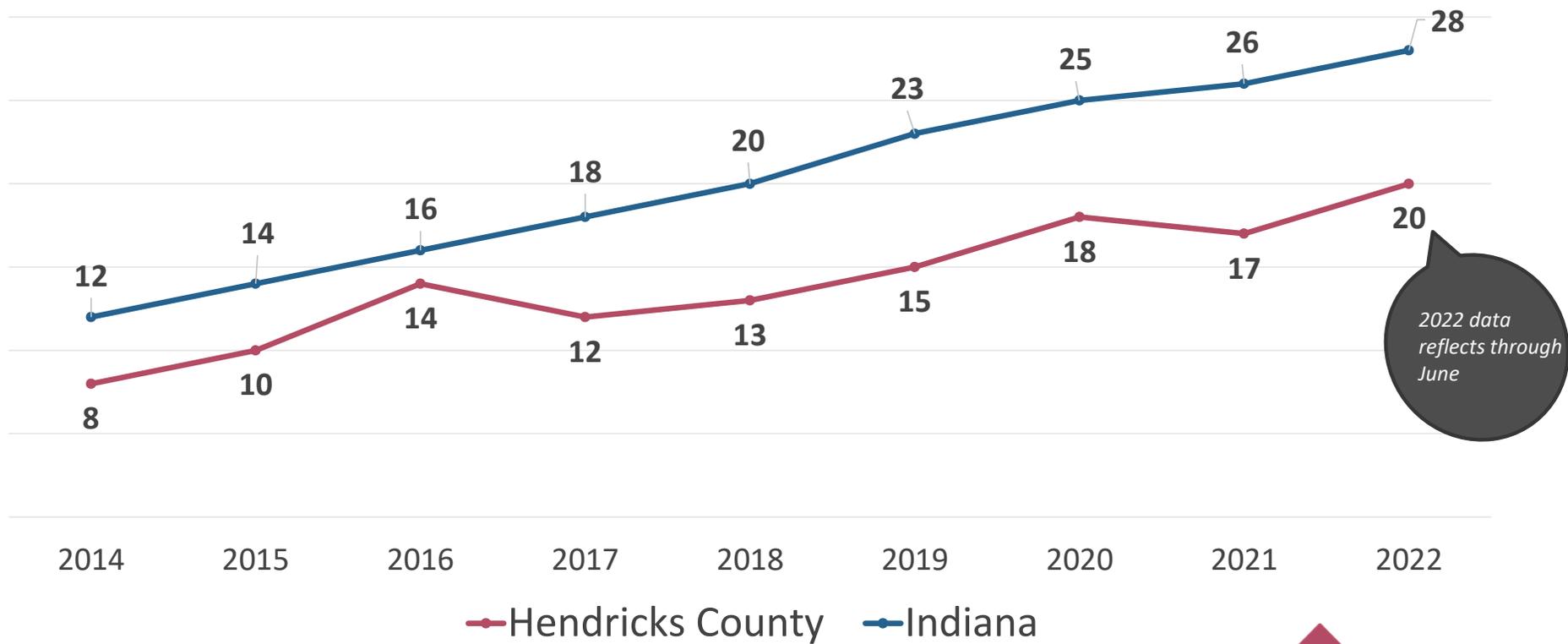
# Key Indicators

Overall decrease in OD deaths and non-fatal events

Lower number of self-reported low mental health days

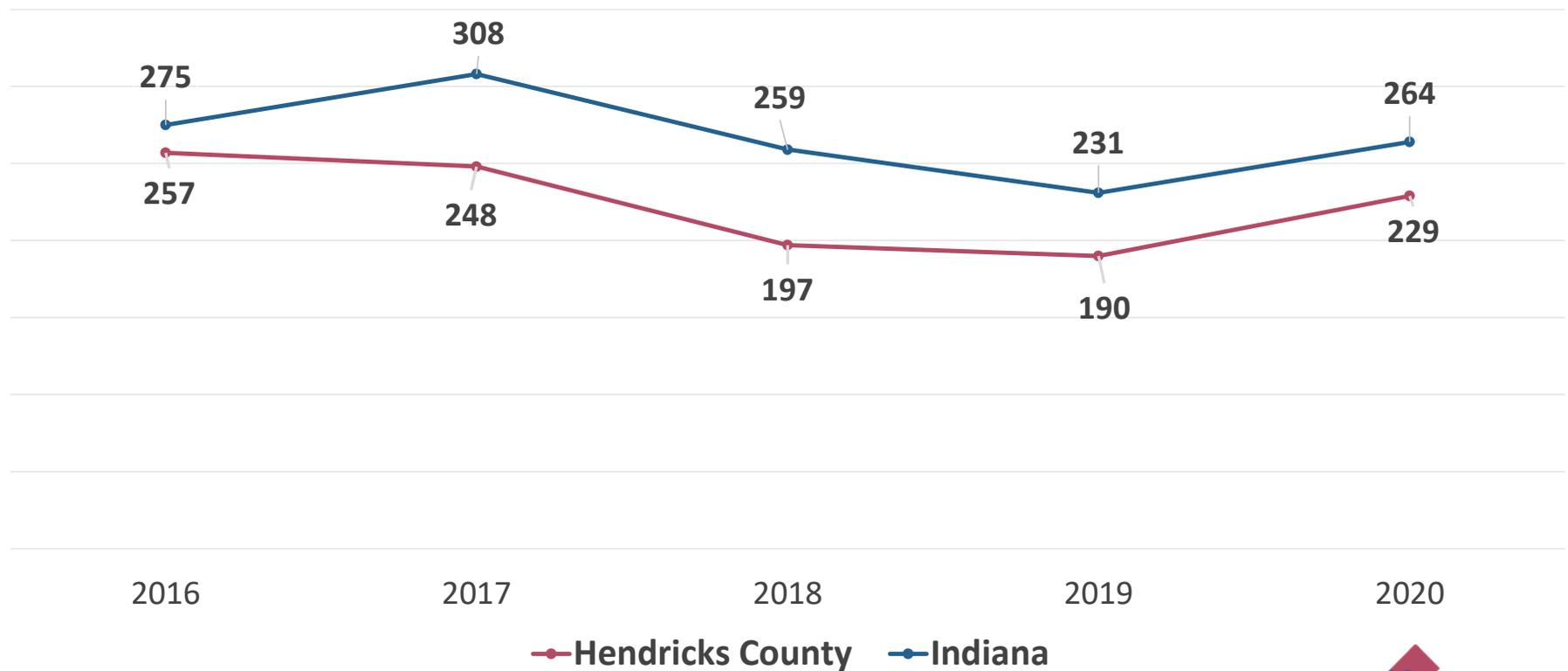


# Deaths involving drug overdose, per 100,000 population, 2014-2022



4 Source: IDOH – 2021 Next Level Recovery Data Dashboard. Accessed July 2022.

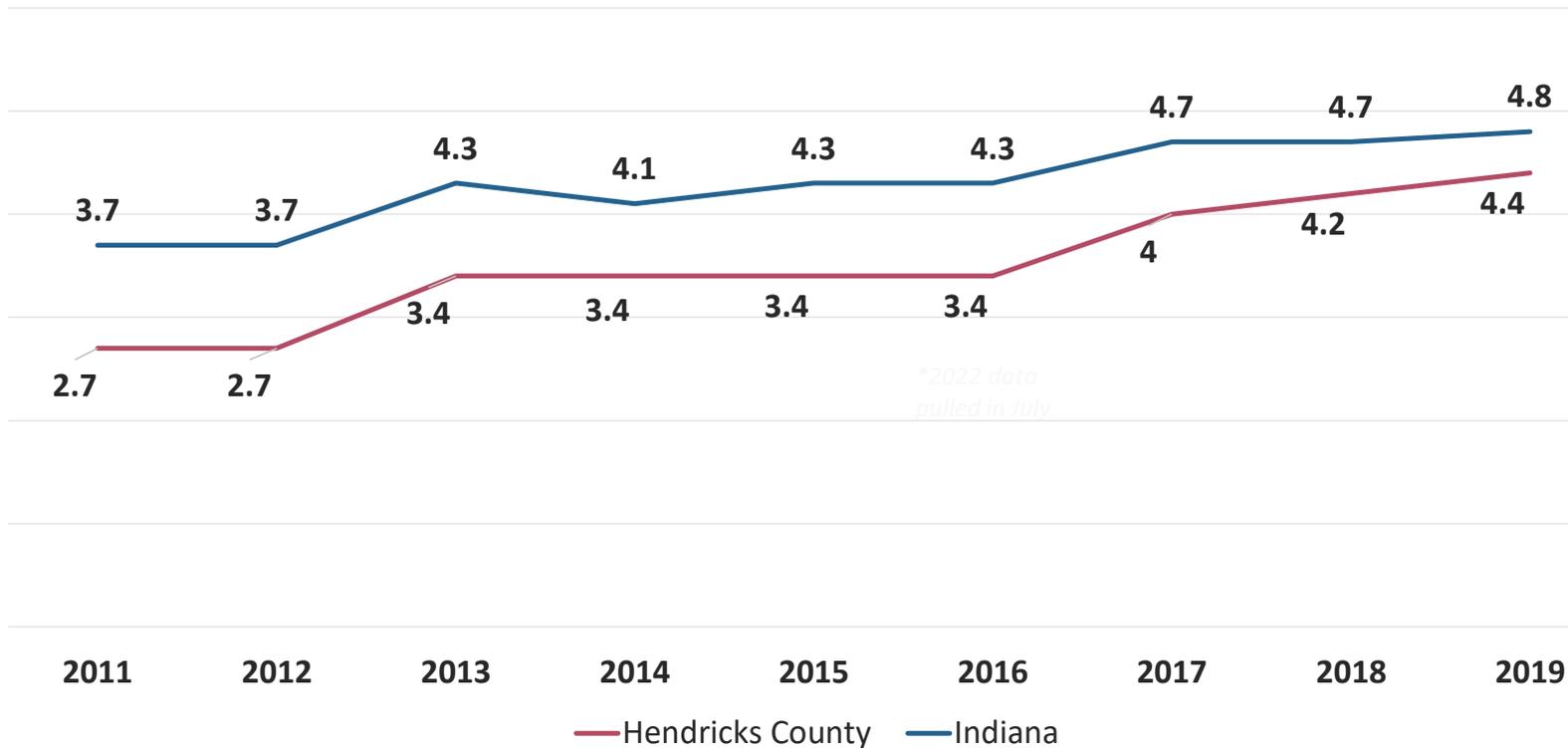
# Emergency room visits due to any drug, per 100,000 population, 2016-2020



<sup>5</sup>Source: IDOH – Management Performance Hub (2021) Opioid Epidemic



# Self-reported number of poor mental health days per month, 2011-2019\*



While Hendricks County residents consistently reported fewer “poor mental health days” than Indiana residents, this number is steadily increasing within Hendricks County.

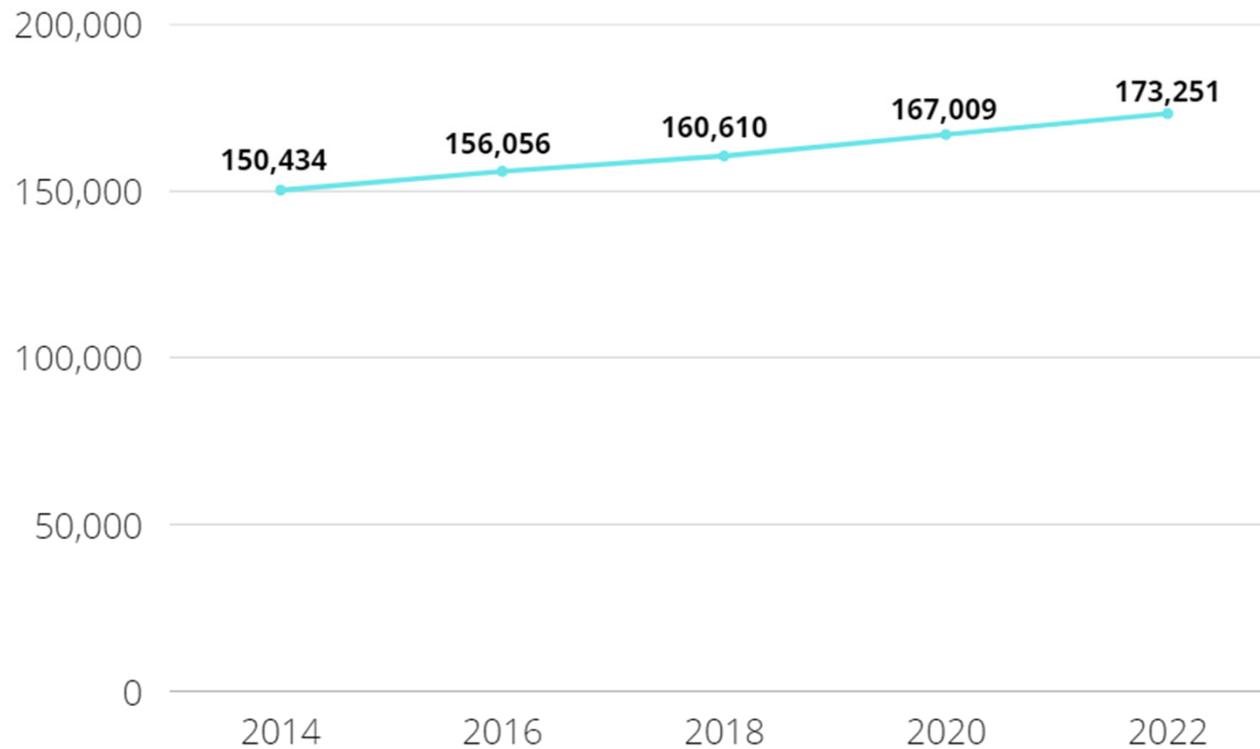
\*Years 2016-2022 should not be compared with prior years, per source

Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>



# County Profile

# Hendricks County Population (2014-2022)



**The Hendricks County population grew by 15% from 2014-2022.**

Indiana's population grew by just over 3% in the same time.

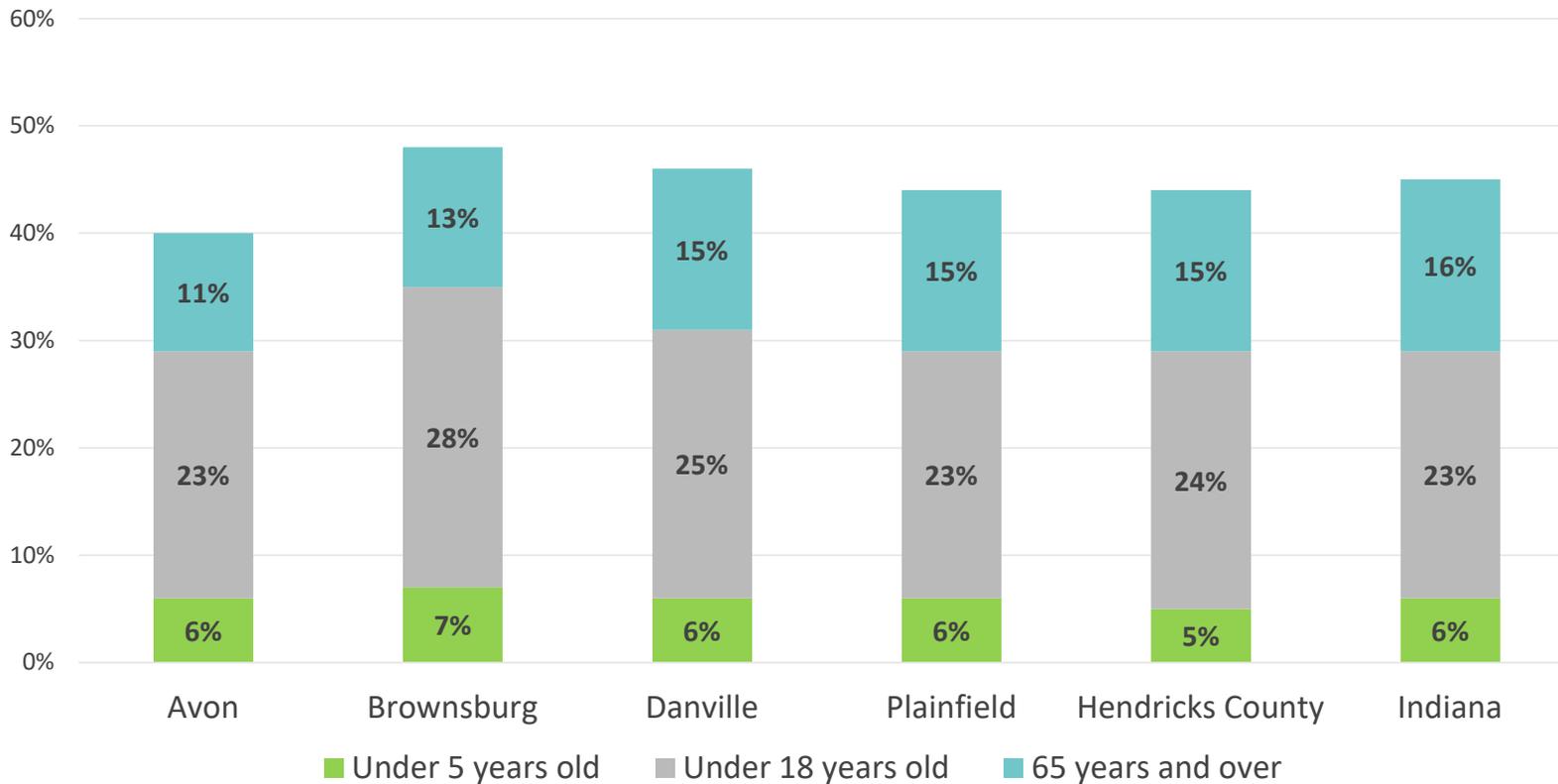
**Hendricks County ranks as the 9th most populated county in Indiana,**

according to STATSIIndiana April 2020 data.

Source: County Health Rankings data, 2014-2022. Accessed July 2022.

<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

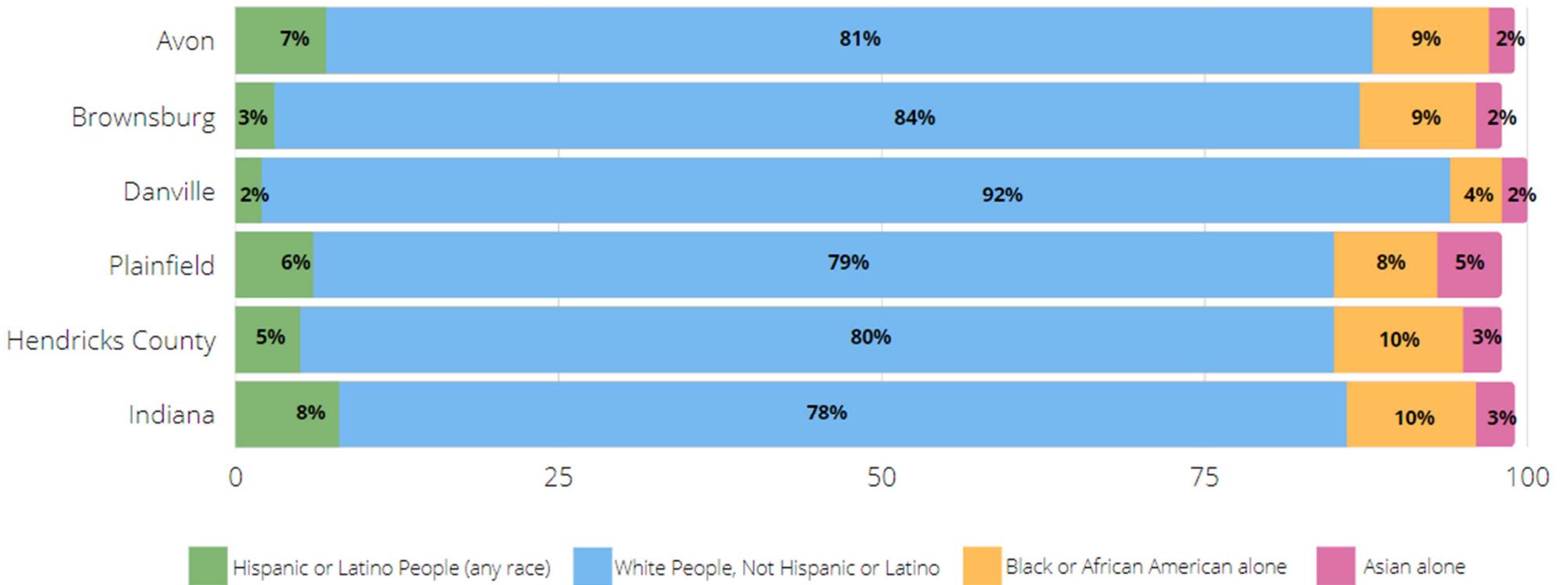
# Hendricks County population by age, 2021



The percent of Hendricks County residents who are ages 65 and older has been climbing steadily, from 11% in 2014 to 15% in 2021; still lower than the Indiana rate of 16% in 2021.

Source: County Health Rankings data, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

# Proportion of Race/Ethnicity by place, 2021



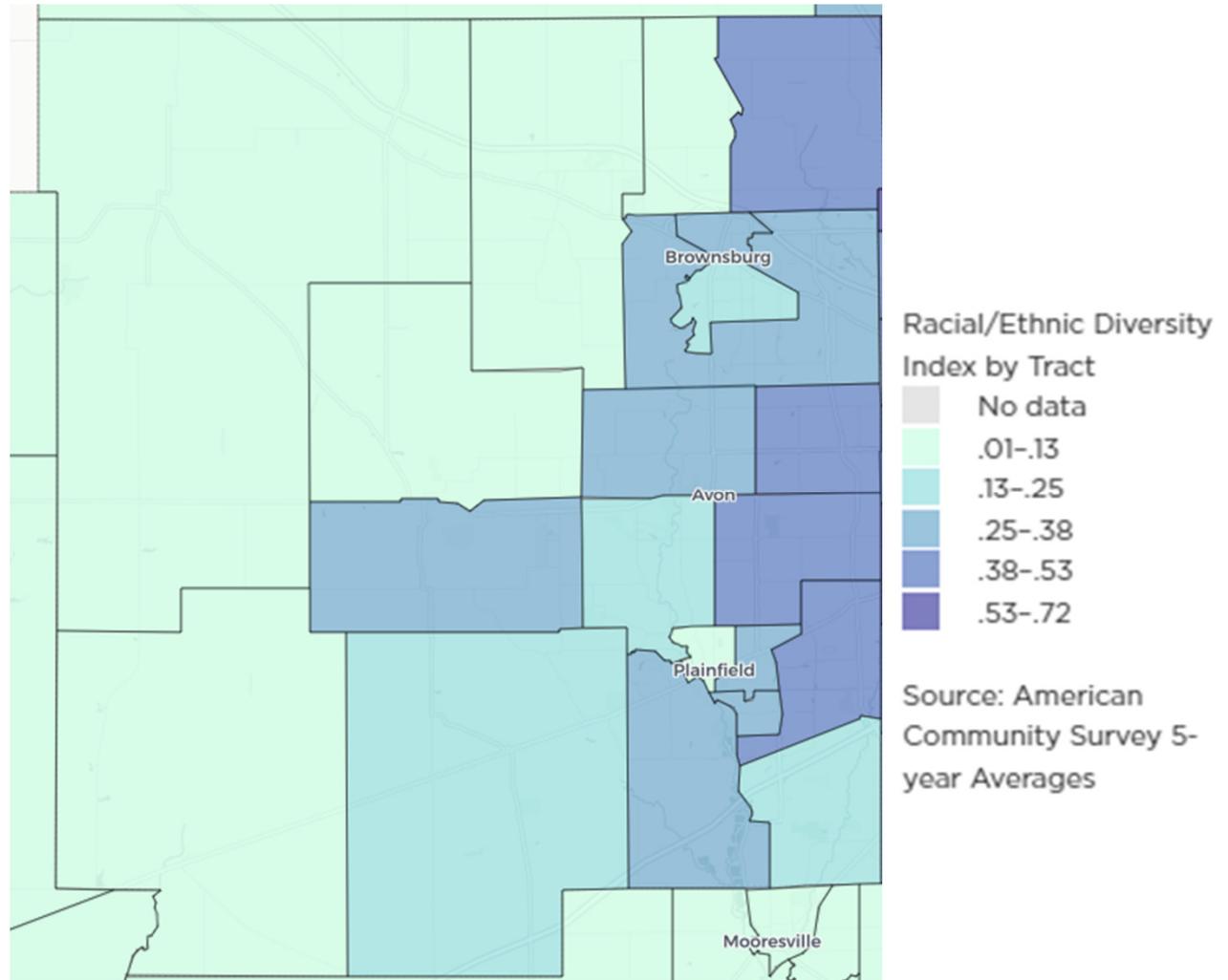
Source: US Census Bureau. Accessed July 2022.

<https://www.census.gov/quickfacts/fact/table/danvilletownindiana,brownsburgtownindiana,plainfieldtownindiana,avontownindiana,hendrickscountyindiana,IN/PST045221>

# Diversity Index for Hendricks County (2021)

The Race Diversity Index is the racial/ethnic distribution for the area. A value of zero represents an area which has one race/ethnicity. A value of one represents an area in which all races and ethnicities are present. This index is based on the Simpson's Index. The Simpson's Index accounts for increased diversity from evenness across categories and the presence of more categories. A tract evenly divided among four races will be more diverse than a tract evenly divided among two races. The data have been normalized so the results to range from zero to one.

**There is less racial/ethnic diversity in Hendricks County compared to Indiana overall.**

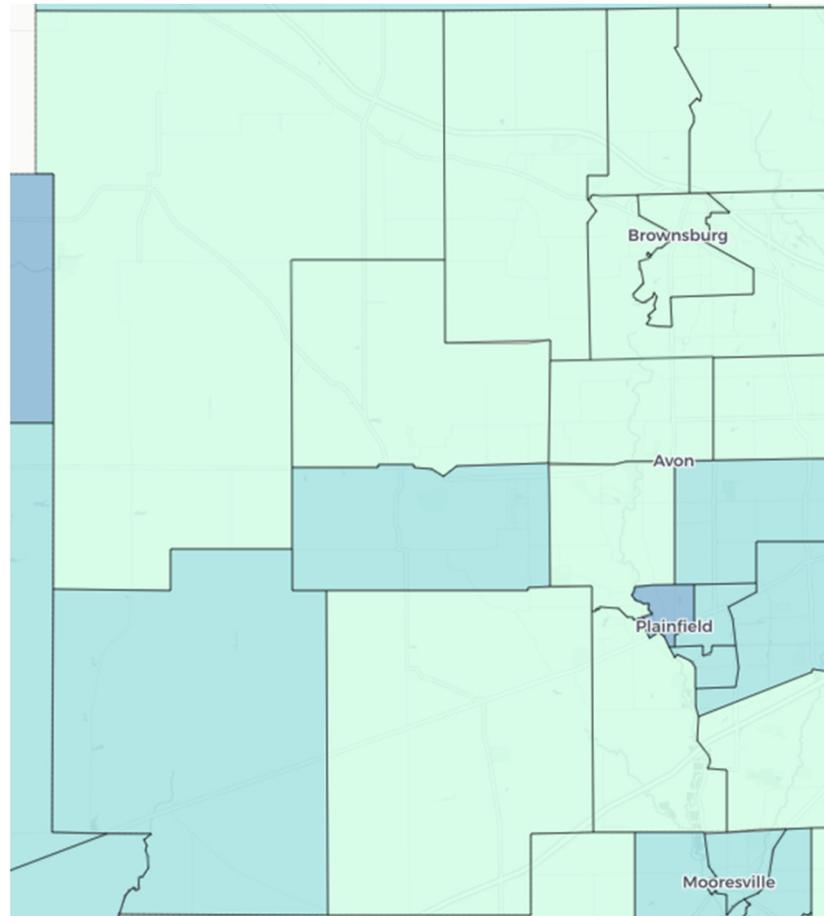


Source: American Community Survey via SAVI, Topic Profiles. Accessed July 2022. <https://profiles.savi.org/topics/dashboard>

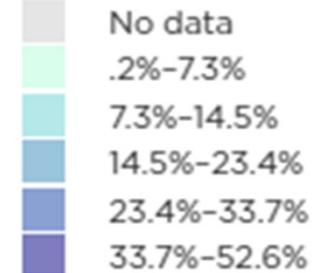
# Poverty rate by census tract in Hendricks County (2021)

The overall poverty rate for Hendricks County is 5% (2021).

Source: census.gov



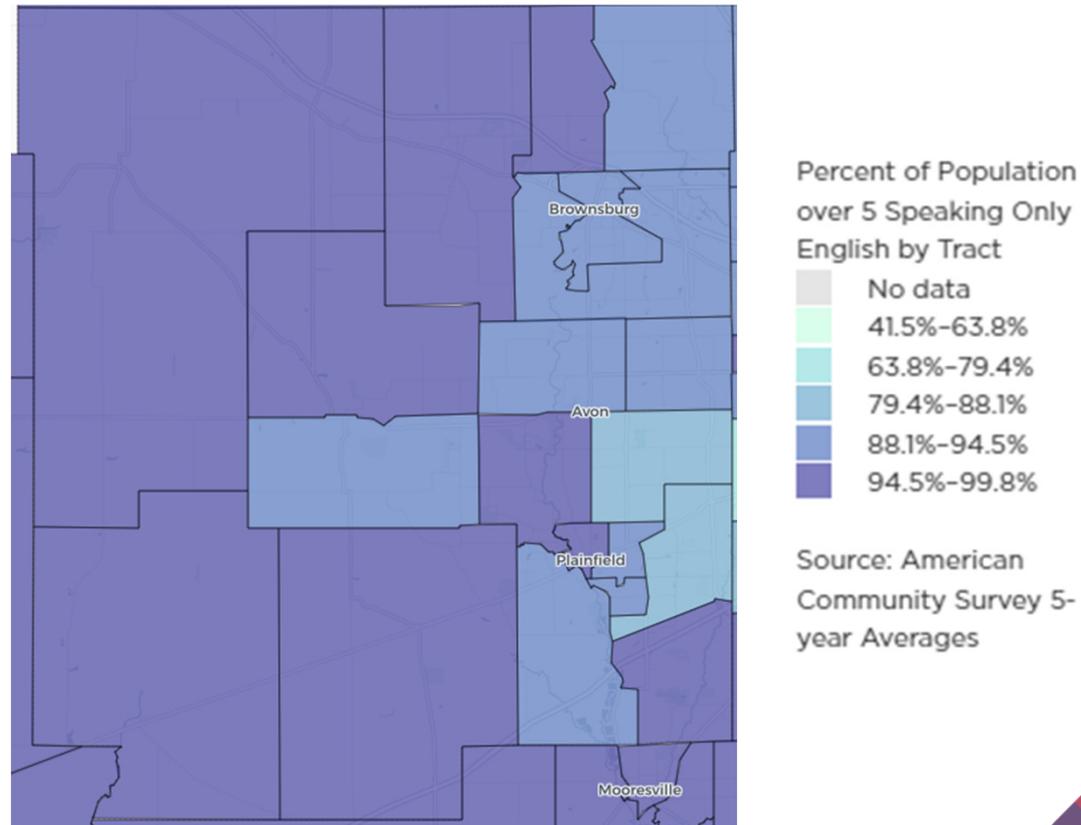
## Poverty Rate by Tract



Source: American Community Survey 5-year Averages

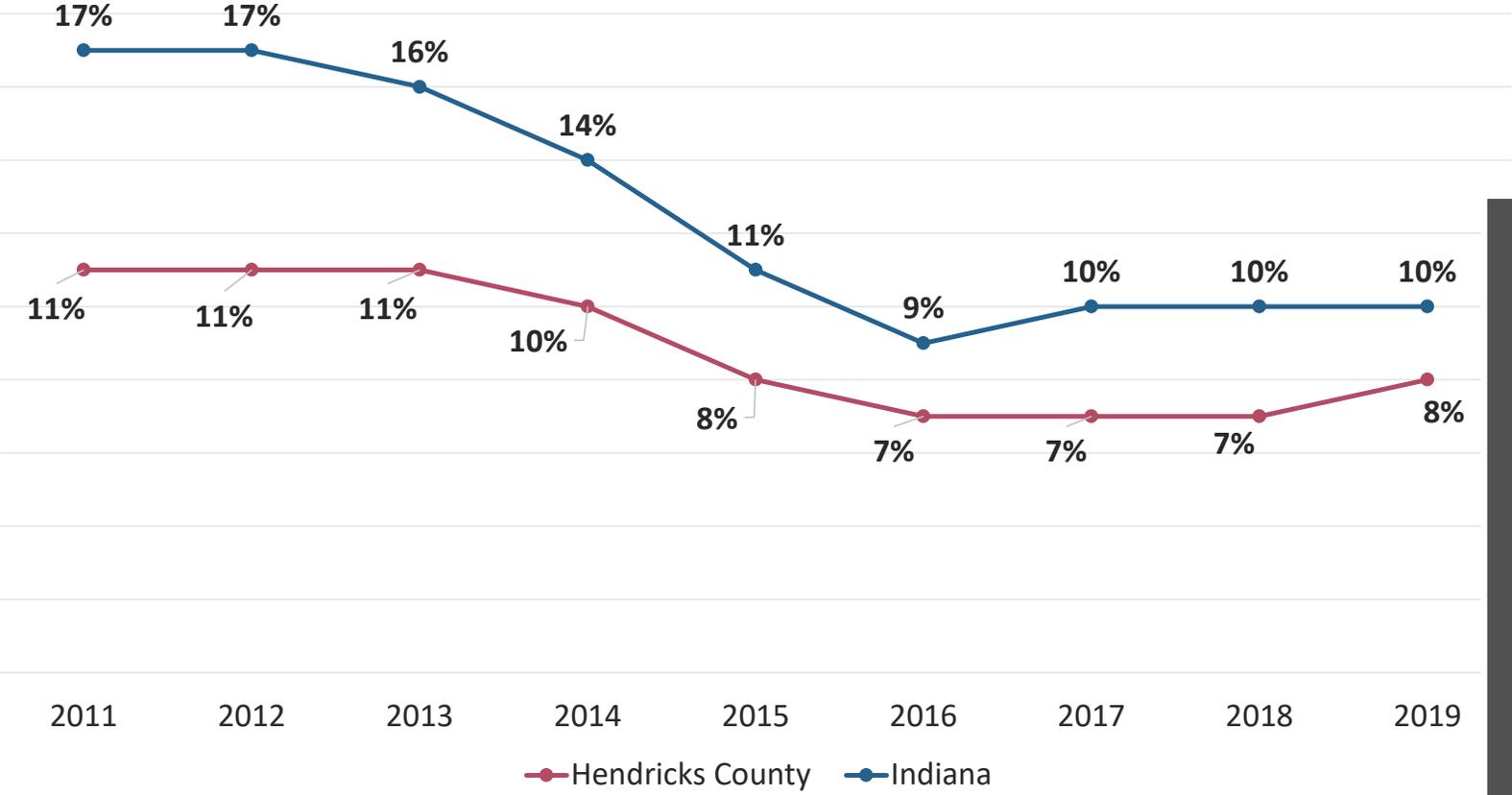
Source: American Community Survey via SAVI, Topic Profiles. Accessed July 2022. <https://profiles.savi.org/topics/dashboard>

# Percent of population over age 5 speaking only English, by census tract in Hendricks County (2021)



<sup>13</sup> Source: American Community Survey via SAVI, Topic Profiles. Accessed July 2022. <https://profiles.savi.org/topics/dashboard>

# Uninsured population under age 65, 2011-2019



**7.7% of Hendricks County residents are uninsured (2019).**

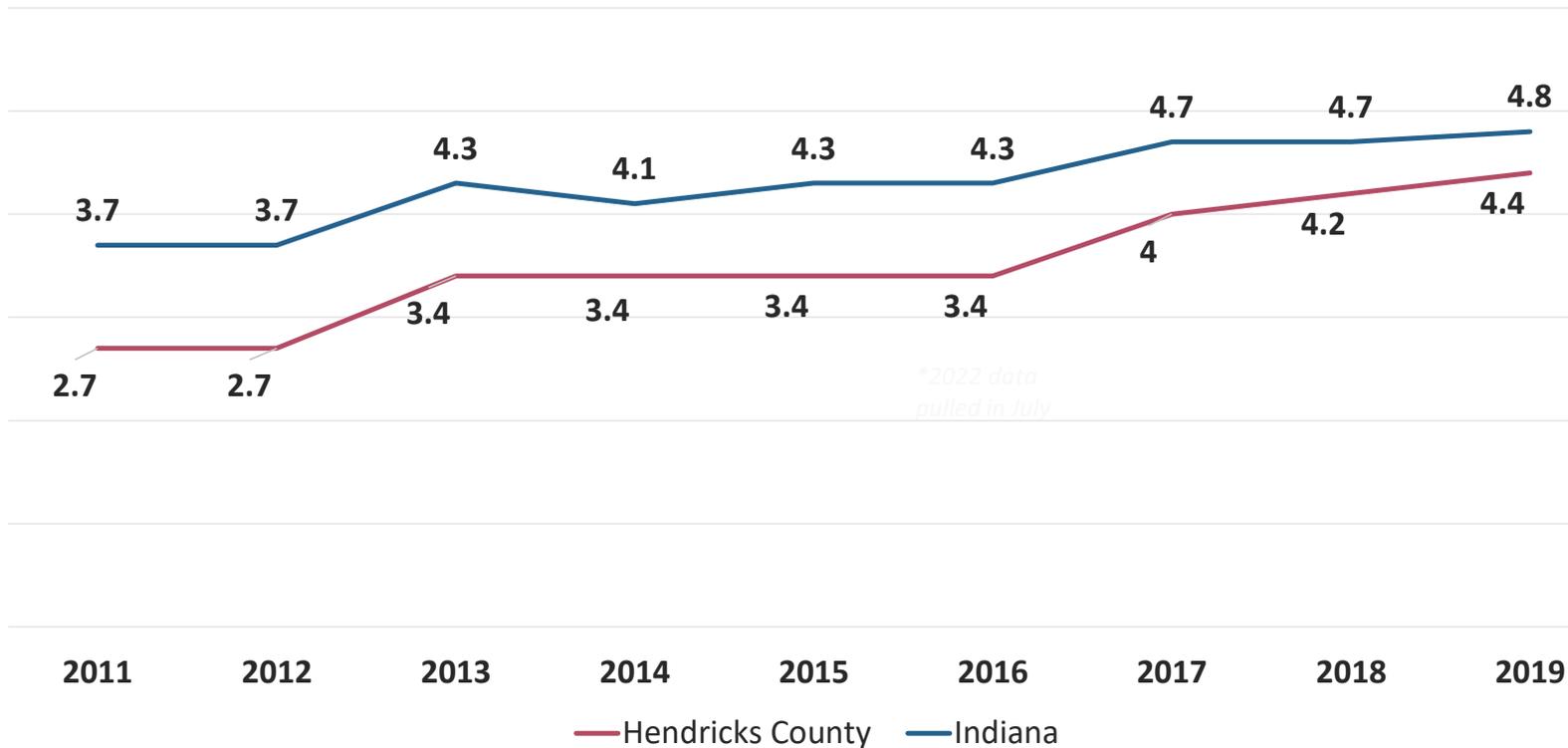
*Source: Indiana Prevention Resource Center (IPRC)*

Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/measure/factors/85/map>

County profile:

# Hendricks County Behavioral Health Data

# Self-reported number of poor mental health days per month, 2011-2019\*



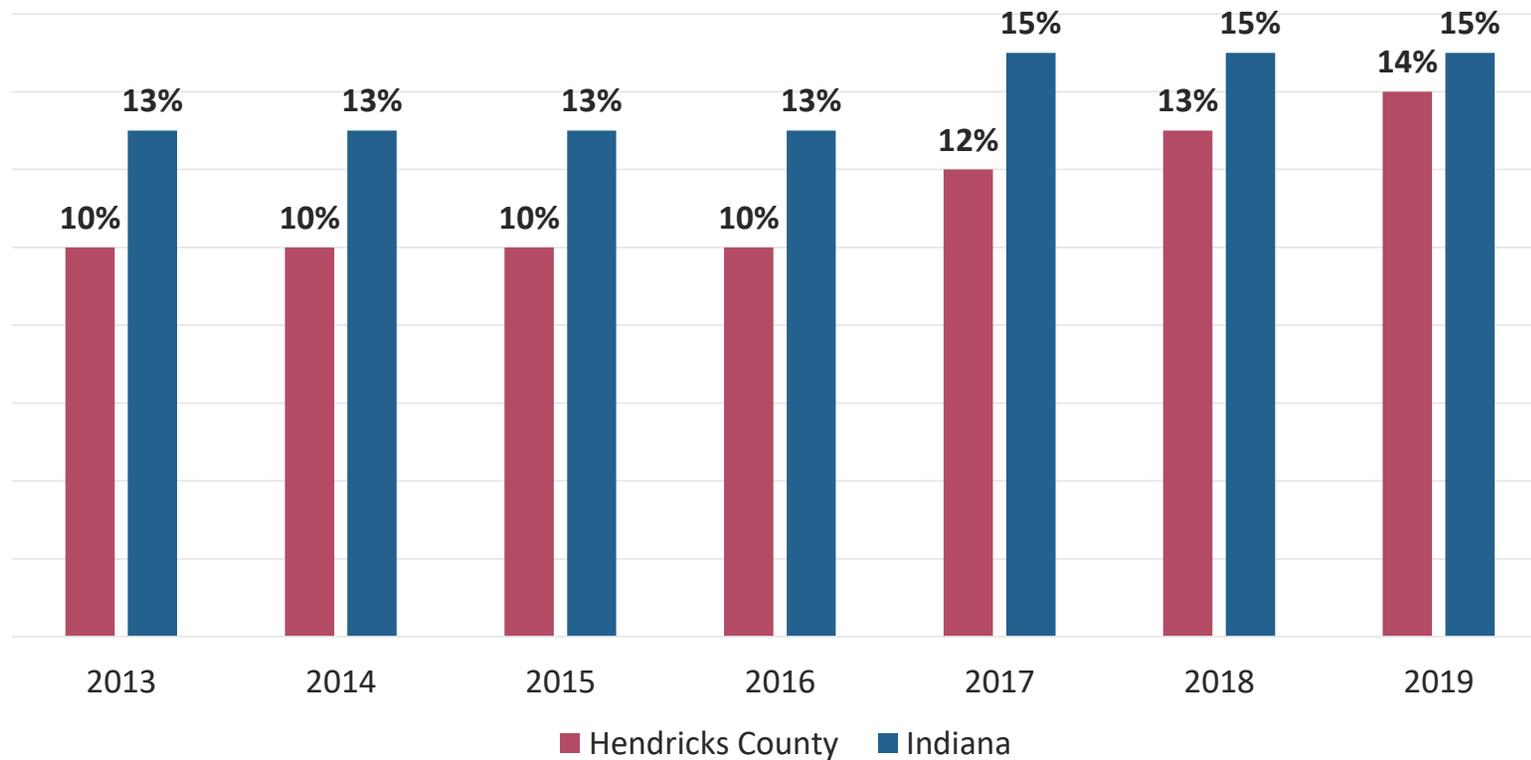
While Hendricks County residents consistently reported fewer “poor mental health days” than Indiana residents, this number is steadily increasing within Hendricks County.

\*Years 2016-2022 should not be compared with prior years, per source

Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>



# Percentage of adults reporting 14 or more days of poor mental health per month, 2013-2019

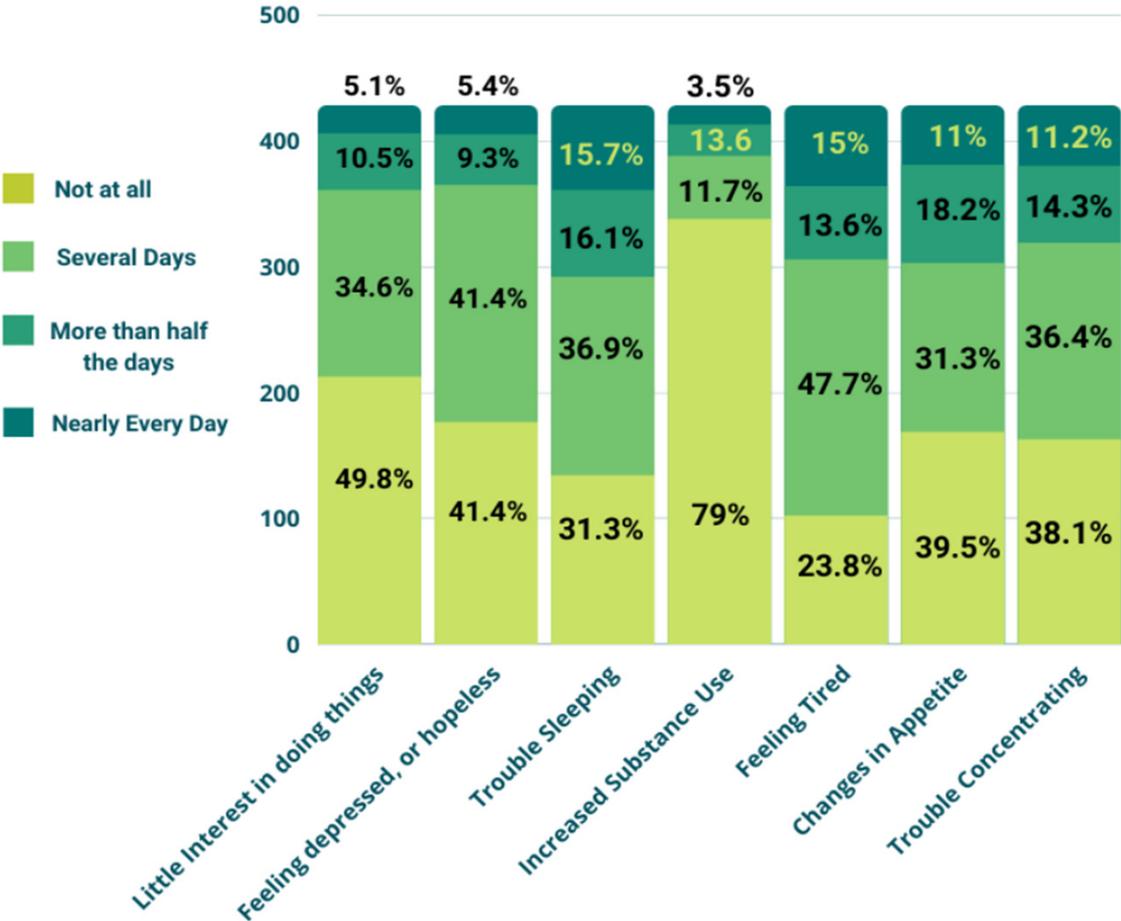


The percent of Hendricks County residents who report “frequent mental distress” is increasing.



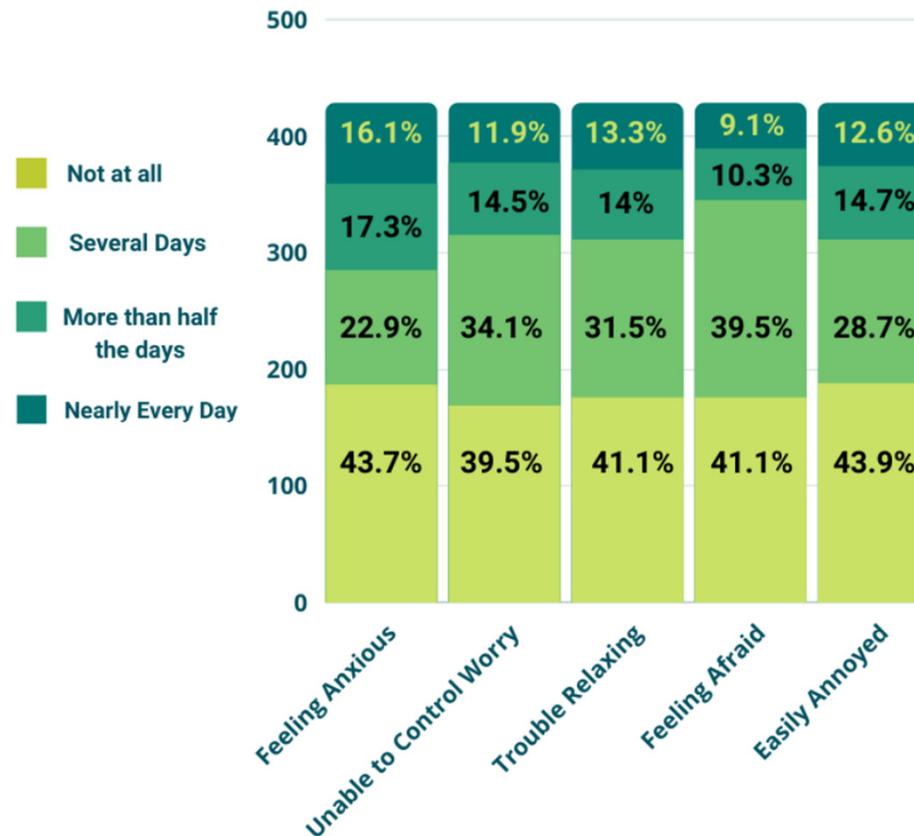
Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<sup>17</sup><https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

# Depression symptoms reported by Hendricks County residents, 2020



Source: Hendricks County Health Partnership 2020 COVID Impact Mental Health Survey. <https://insight-editor.livestories.com/s/v2/2020-mental-health-survey/371fbb1f-72cb-4fad-8bff-28cf38b51d85>

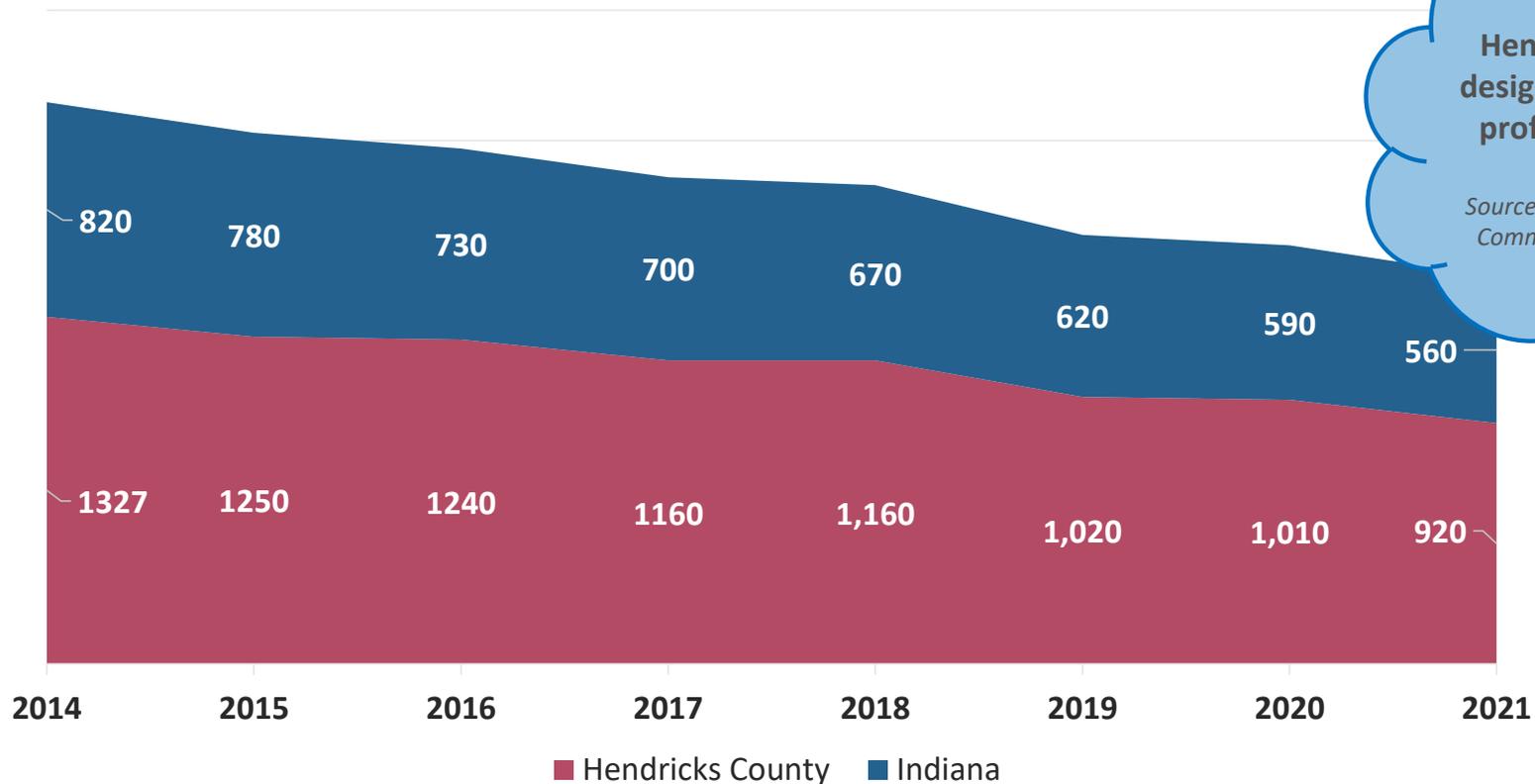
# Anxiety symptoms reported by Hendricks County residents, 2020



Respondents who made less than \$40,000 were more likely to have said their mental health was impacted by the pandemic.

Source: Hendricks County Health Partnership 2020 COVID Impact Mental Health Survey. <https://insight-editor.livestories.com/s/v2/2020-mental-health-survey/371fbb1f-72cb-4fad-8bff-28cf38b51d85>

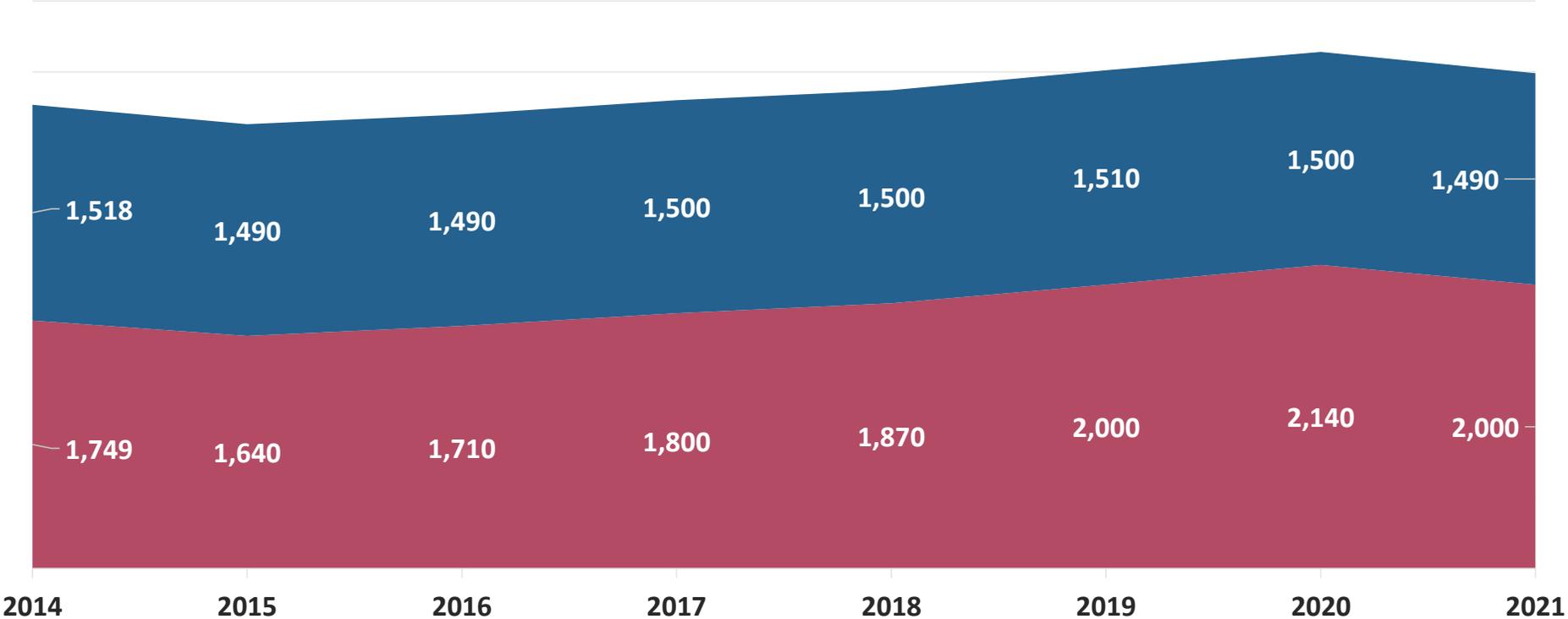
# Ratio of mental health providers to population, 2014-2021



Hendricks County has been designated as a mental health professional shortage area.

Source: 2021 Hendricks Regional Health Community Health Needs Assessment

# Ratio of primary care providers to population, 2015-2021



■ Hendricks County ■ Indiana

Source: Robert Wood Johnson, County Health Rankings  
21



*Although Hendricks County has a relatively low ratio of primary care providers, mental health care providers, and dentists to population, **the county also ranks high for the percentage of workers who are commuting outside of the county for work; many people working in neighboring counties such as Marion are receiving care outside of Hendricks County.***

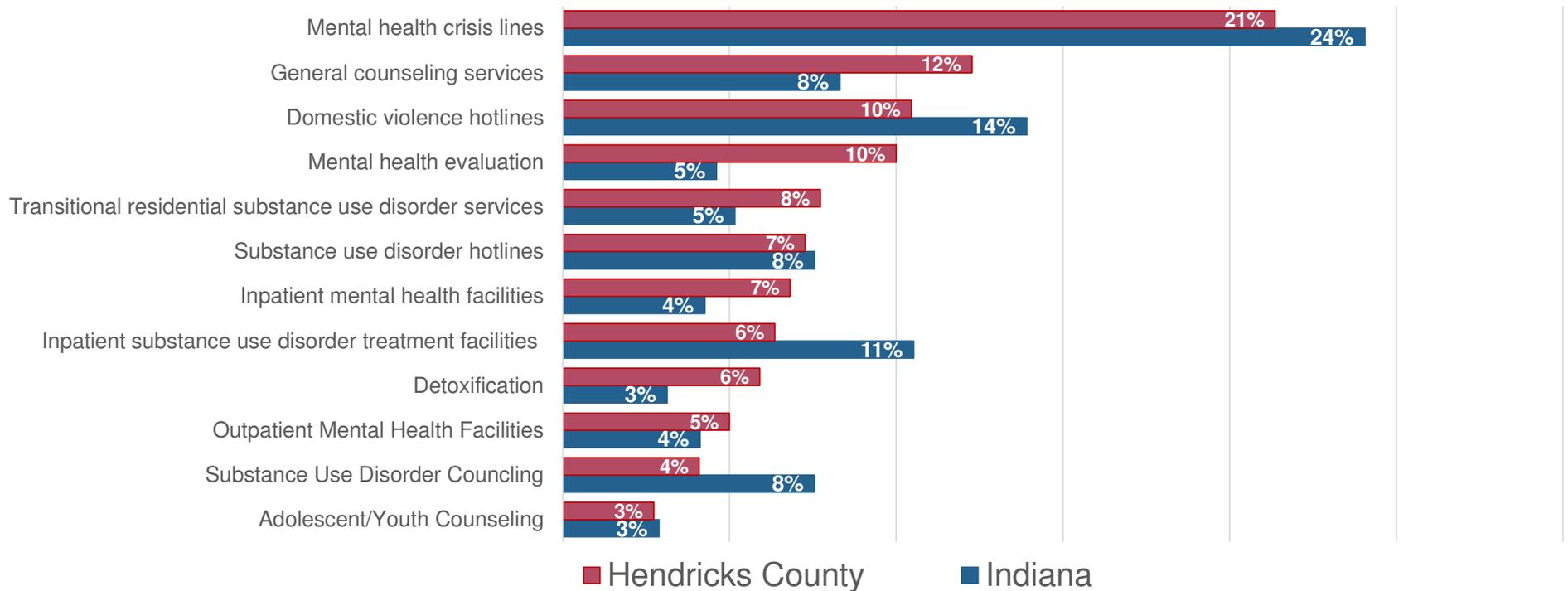
*Source: 2021 Hendricks Regional Health Community Health Needs Assessment*

# Indiana 211

2-1-1 is a free and confidential service that helps Hoosiers across Indiana find the local resources they need.

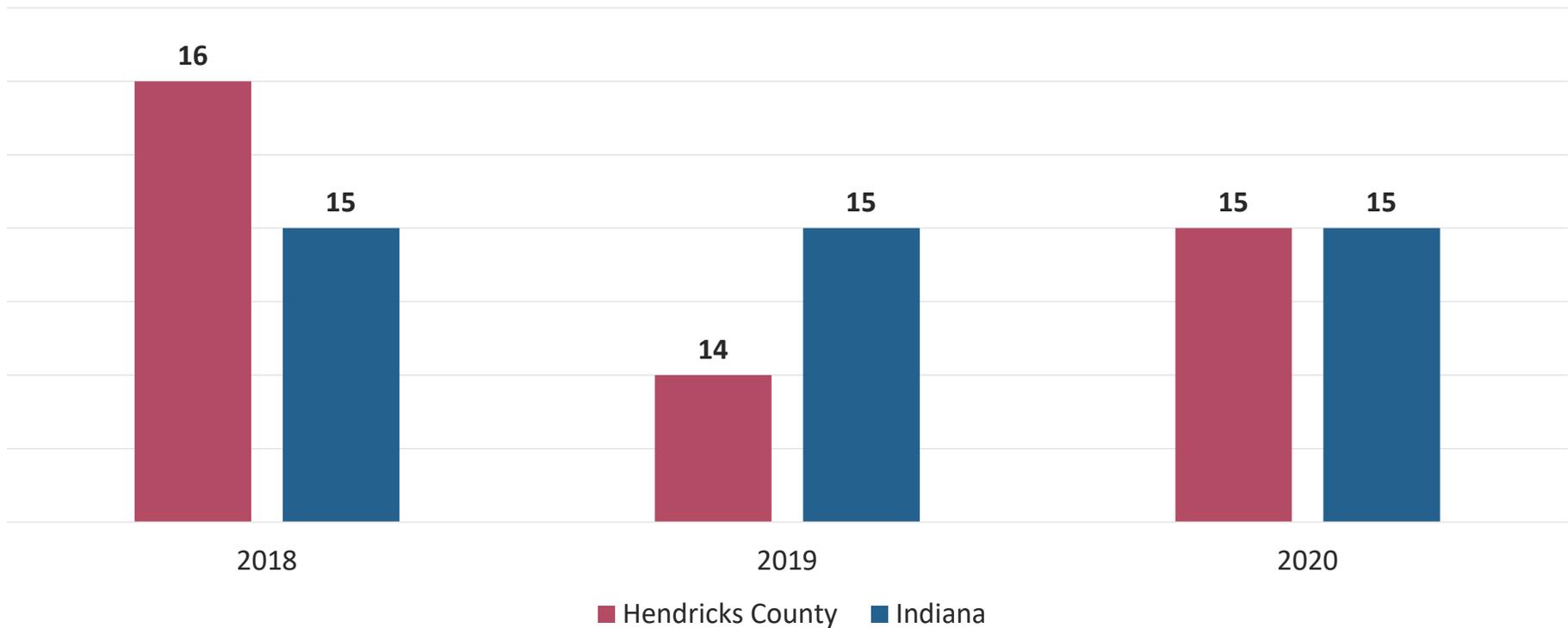
- Received 5,000+ calls from Hendricks County since January 2020
- “Mental health/addictions” was the 9<sup>th</sup> most common type of referral (299).
- “Mental health/substance use disorders” was the 13<sup>th</sup> most common type of referral (156).

# 211 Calls for mental health, addiction, and substance use disorder referrals, 2020 - 2022\*



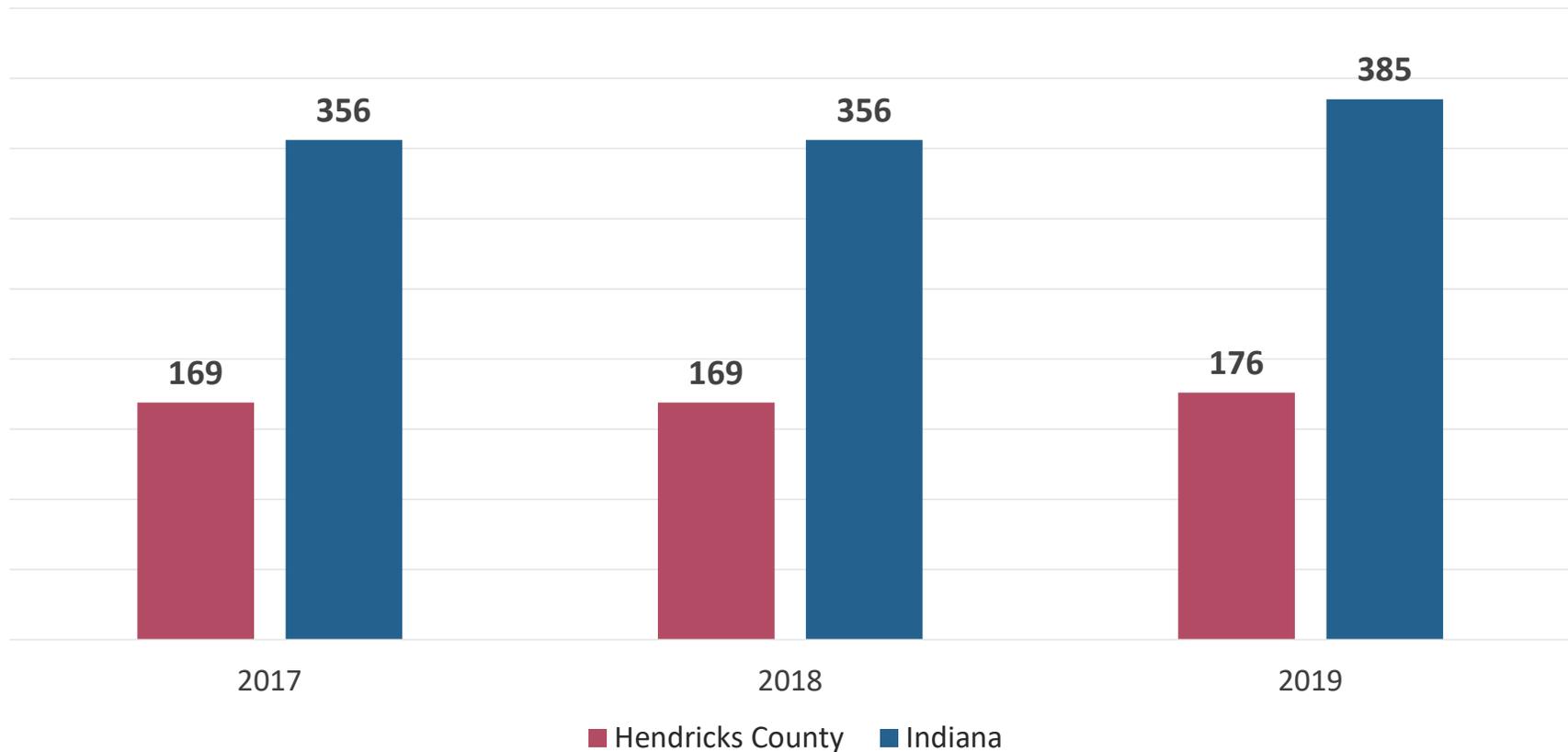
Source: Indiana 211 Data Dashboard, January 2020-July 2022 data. \*Accessed July 2022. <https://in211.communityos.org/datadashboard>

# Suicide rate per 100,000 population, 2018-2020



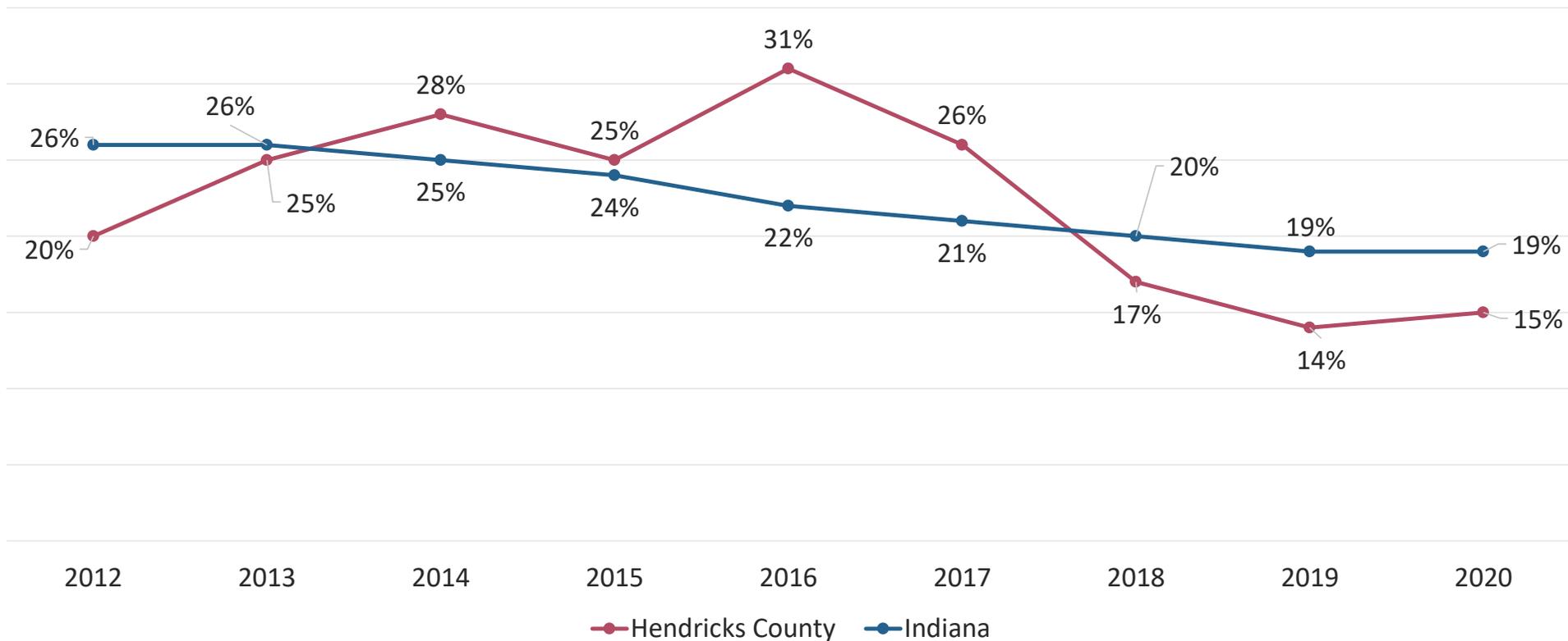
Source: County Health Rankings, 2020-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

# Violent crime per 100,000 population, 2017-2019



Source: County Health Rankings, 2017-2019. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2019/rankings/hendricks/county/factors/overall/snapshot>

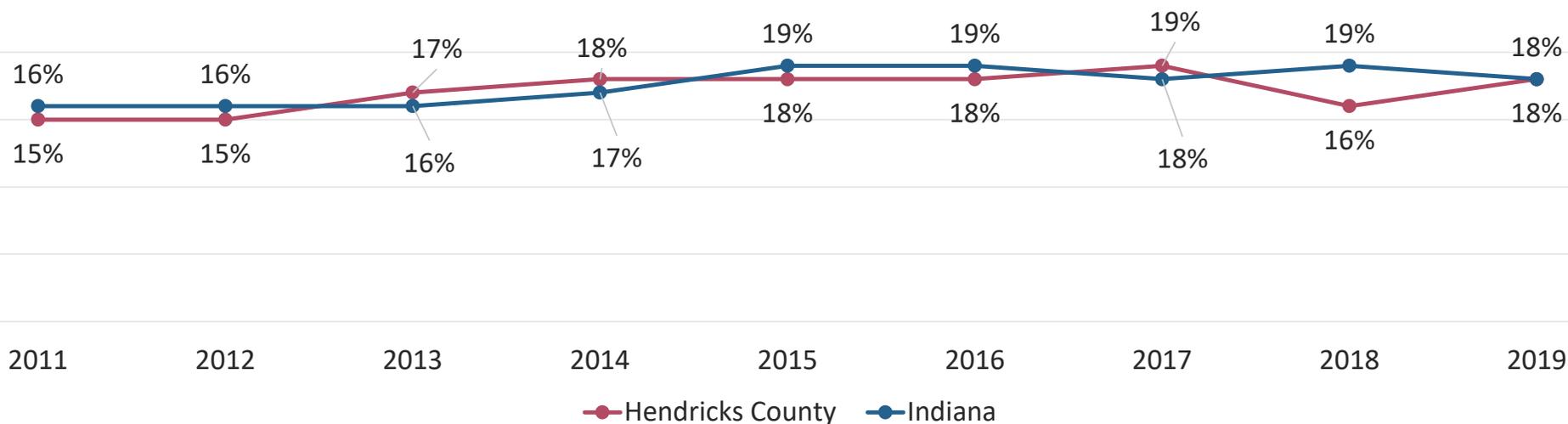
# Alcohol-impaired driving deaths, 2012-2020



Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>



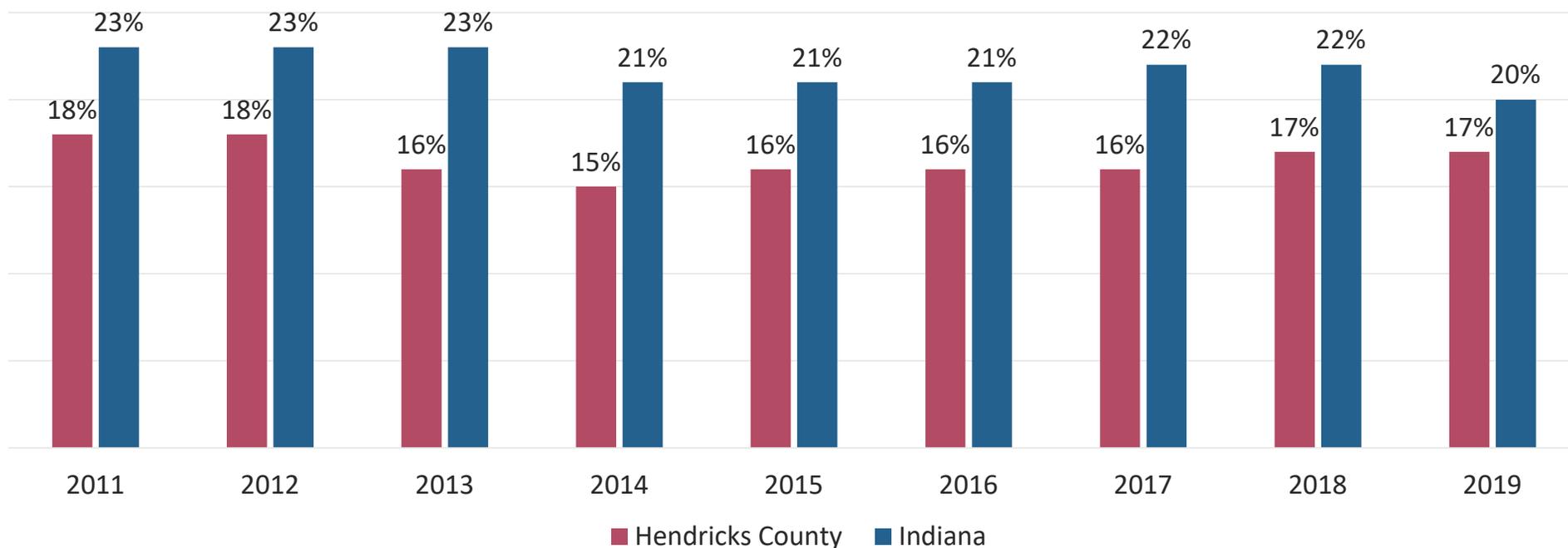
# Percentage of adults report excessive drinking, 2011-2019



Source: County Health Rankings, 2014-2022. Accessed July 2022.

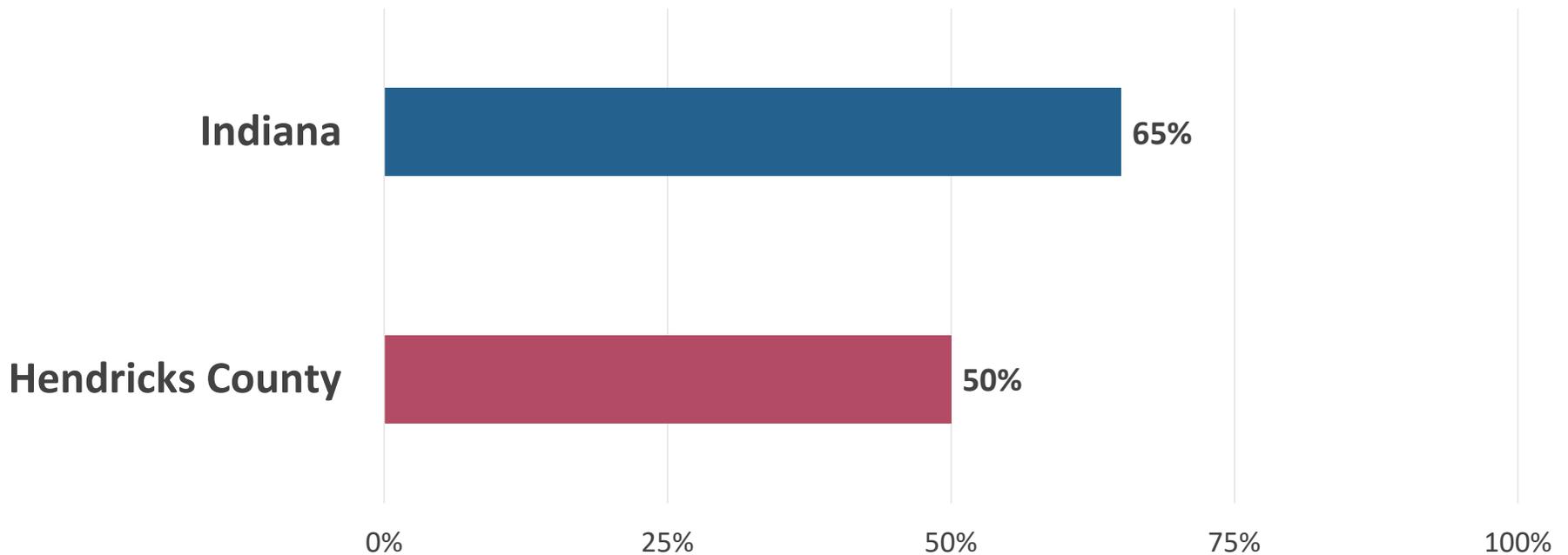
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

# Percentage of adults who are current smokers, 2011-2019



Source: County Health Rankings, 2014-2022. Accessed July 2022.  
<https://www.countyhealthrankings.org/app/indiana/2022/rankings/hendricks/county/outcomes/overall/snapshot>

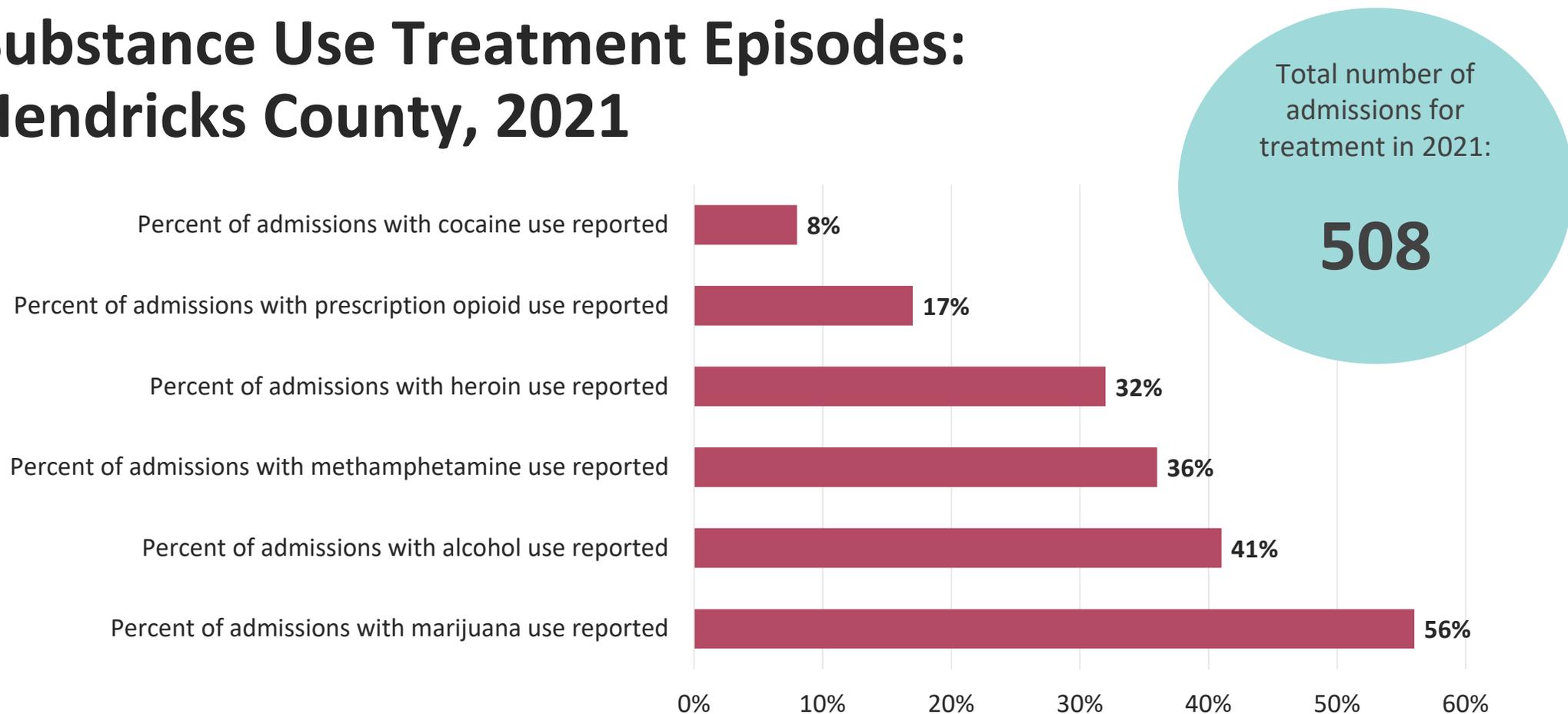
# Parent alcohol and/or drug abuse cited as removal reason among children removed from homes, 2021



Source: Indiana Department of Child Services

Note: Percentages may underrepresent removals that involve parental alcohol and/or drug abuse as data rely on parent alcohol and/or drug abuse being selected as a removal reason. There may be instances in cases where alcohol and/or drug abuse is present but not selected as a removal reason.

# Substance Use Treatment Episodes: Hendricks County, 2021

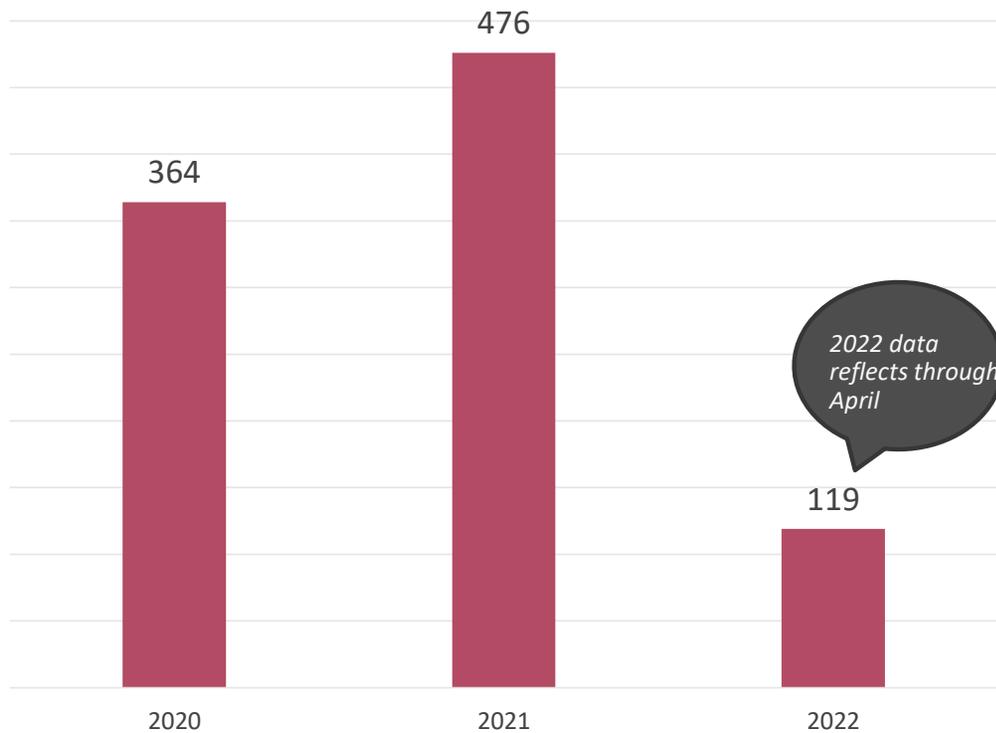


Source: Indiana Prevention Resource Center (IPRC). Accessed July 2022. <https://iprc.iu.edu/epidemiological-data/>

Note: Treatment data represent the number of admissions to treatment, not individuals. Opioid use/dependence includes use of heroin, non-prescription methadone, and other opiates/synthetics. Prescription stimulant use/dependence includes use of other stimulants and other amphetamines. Dependence was defined as "individuals in substance abuse treatment listing [name of substance] as their primary substance at admission."

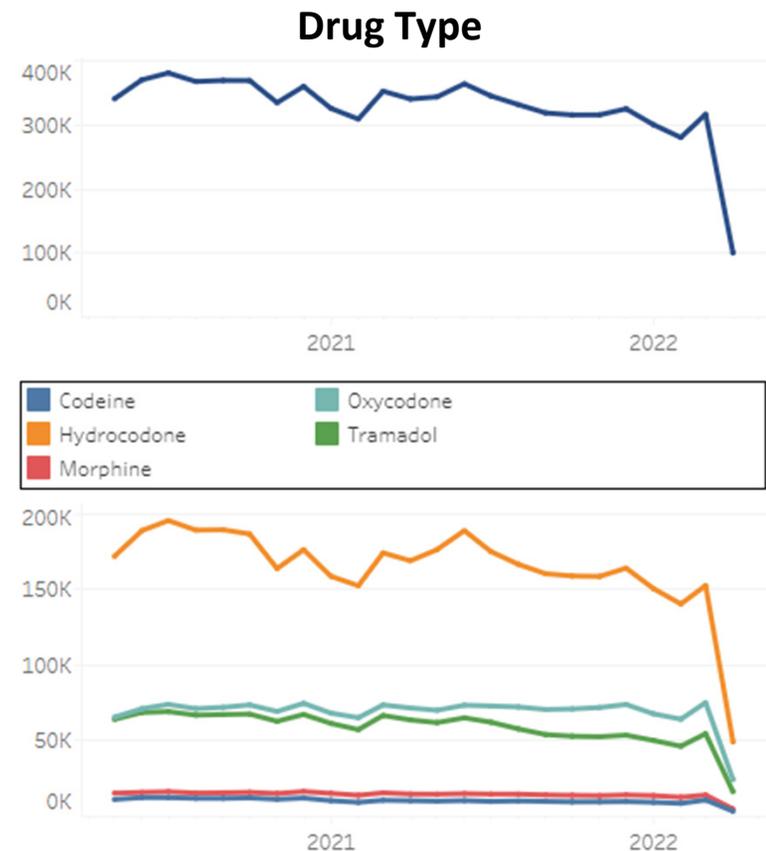
# Opioid Dispensations: Hendricks County, 2020-2022

Dispensations\* per 1,000 county residents, by patient county

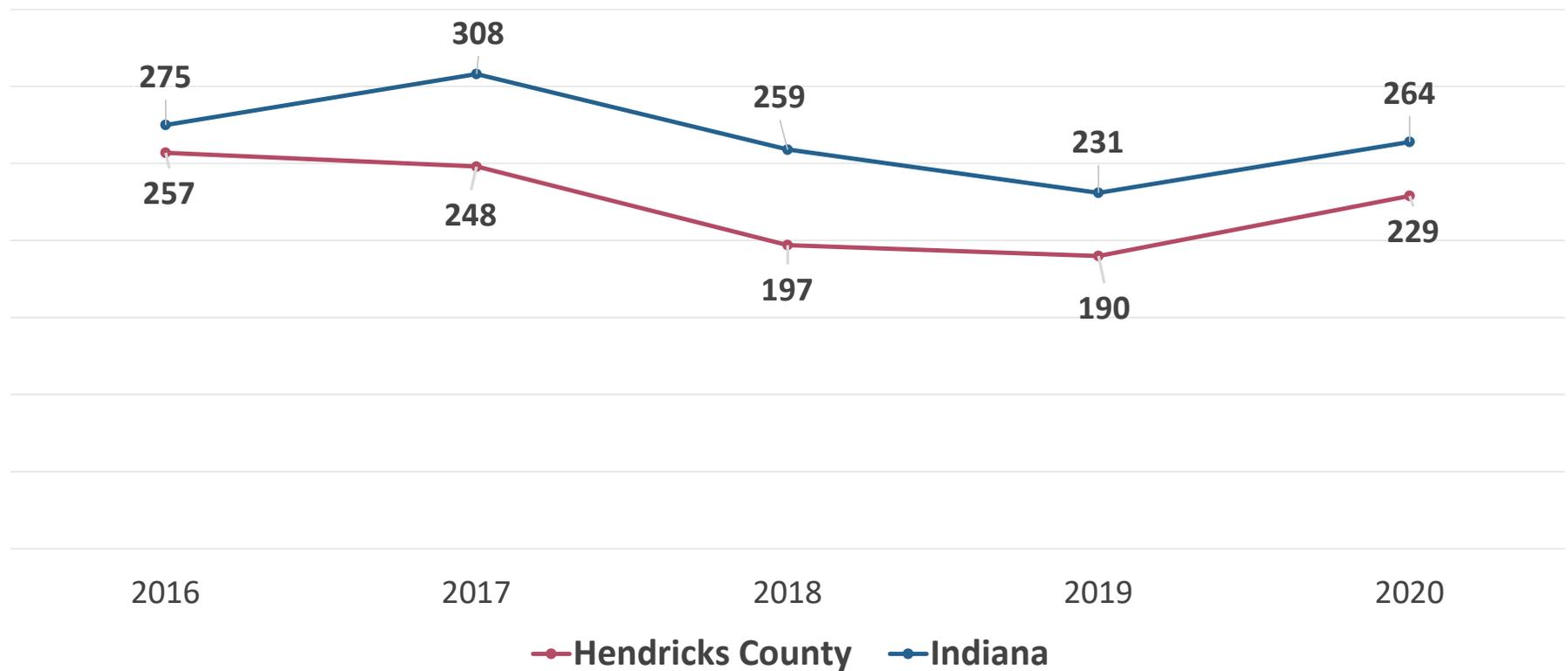


\*Note: A dispensation is the combination of a prescription and the date a pharmacy fills it.

Source: Indiana PDMP Dashboard <https://www.in.gov/mph/projects/pdmp/>



# Emergency room visits due to any drug, per 100,000 population, 2016-2020



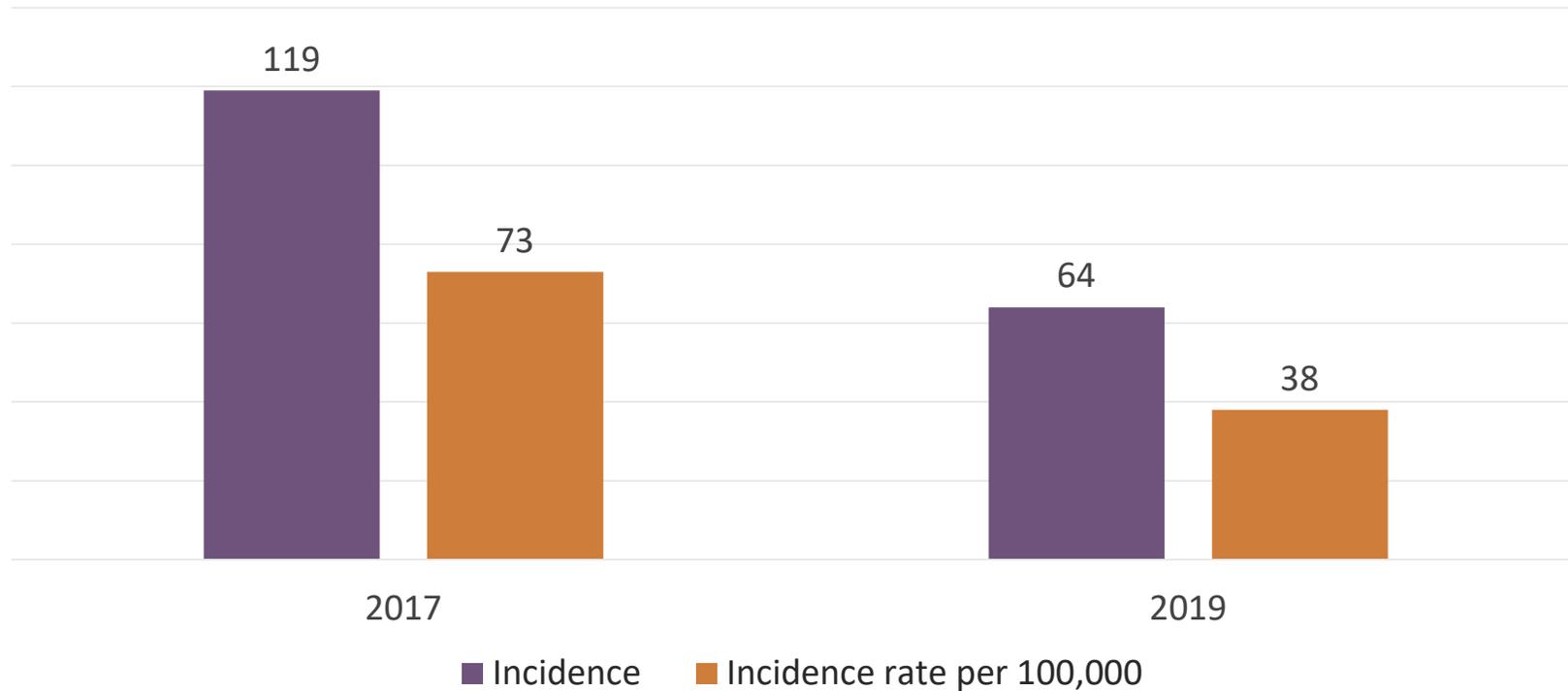
Source: IDOH – Management Performance Hub (2021) Opioid Epidemic

# Non-fatal inpatient hospitalizations involving any drug overdose, Hendricks County, 2017-2019

2017	2019
<i>Incidence rate per 100,000:</i>  <b>58</b>	<i>Incidence rate per 100,000:</i>  <b>51</b>

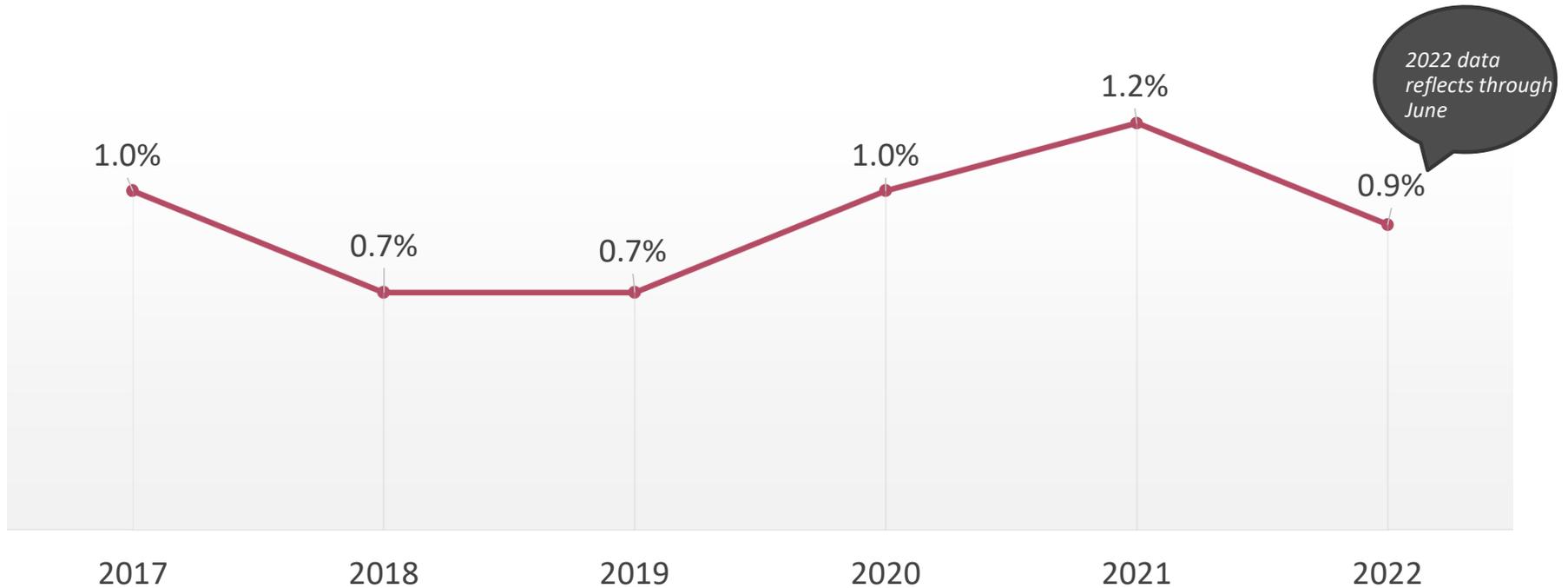
Source: IDOH – 2021 Stats Explorer. Accessed July 2022. <https://www.in.gov/health/erc/public-health-geographics/geographic-data/>

# Non-fatal emergency department visits involving any heroin overdose, Hendricks County, 2017-2019



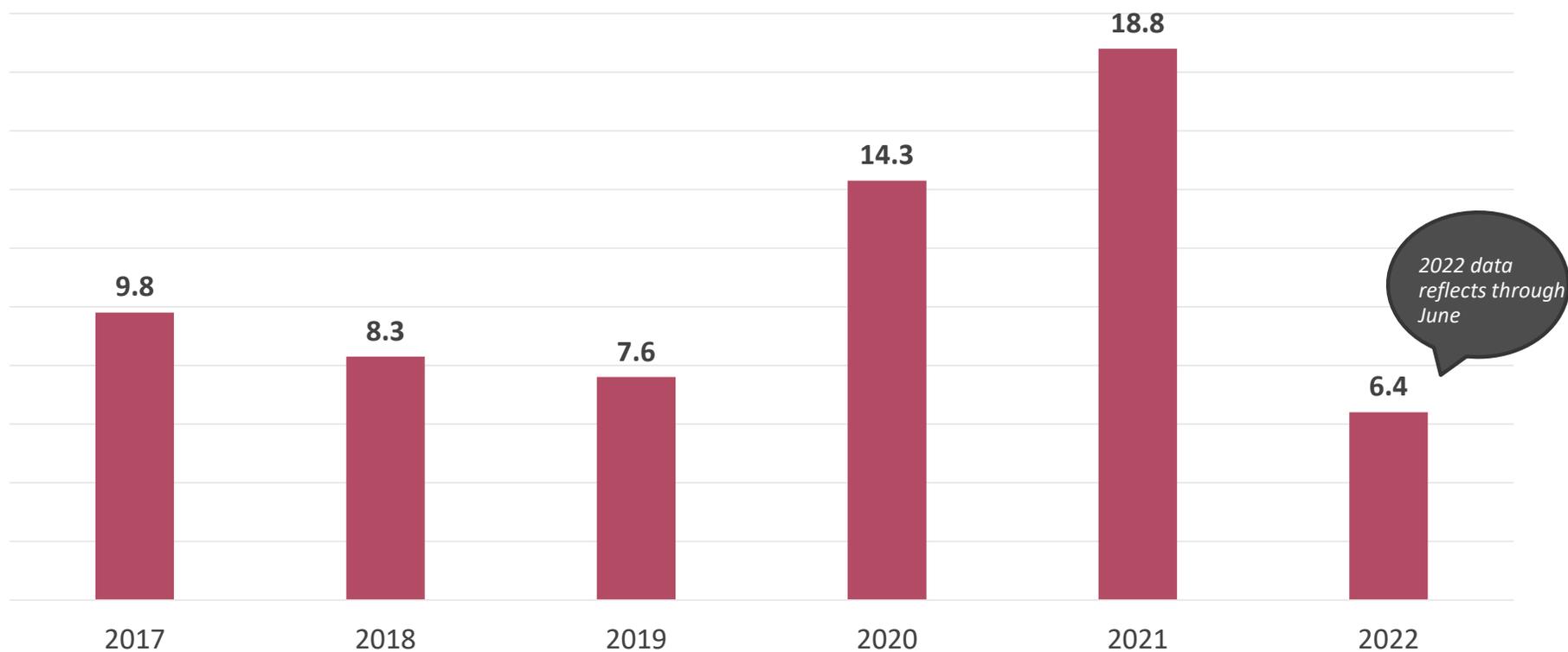
Source: IDOH – 2021 Stats Explorer. Accessed July 2022. <https://www.in.gov/health/erc/public-health-geographics/geographic-data/>

# Percent of Hendricks County EMS Incidents where Naloxone was administered, 2017-2022



Source: IDOH – 2021 Next Level Recovery Data Dashboard

# EMS Naloxone administration rate per 10,000 Hendricks County residents, 2017-2022

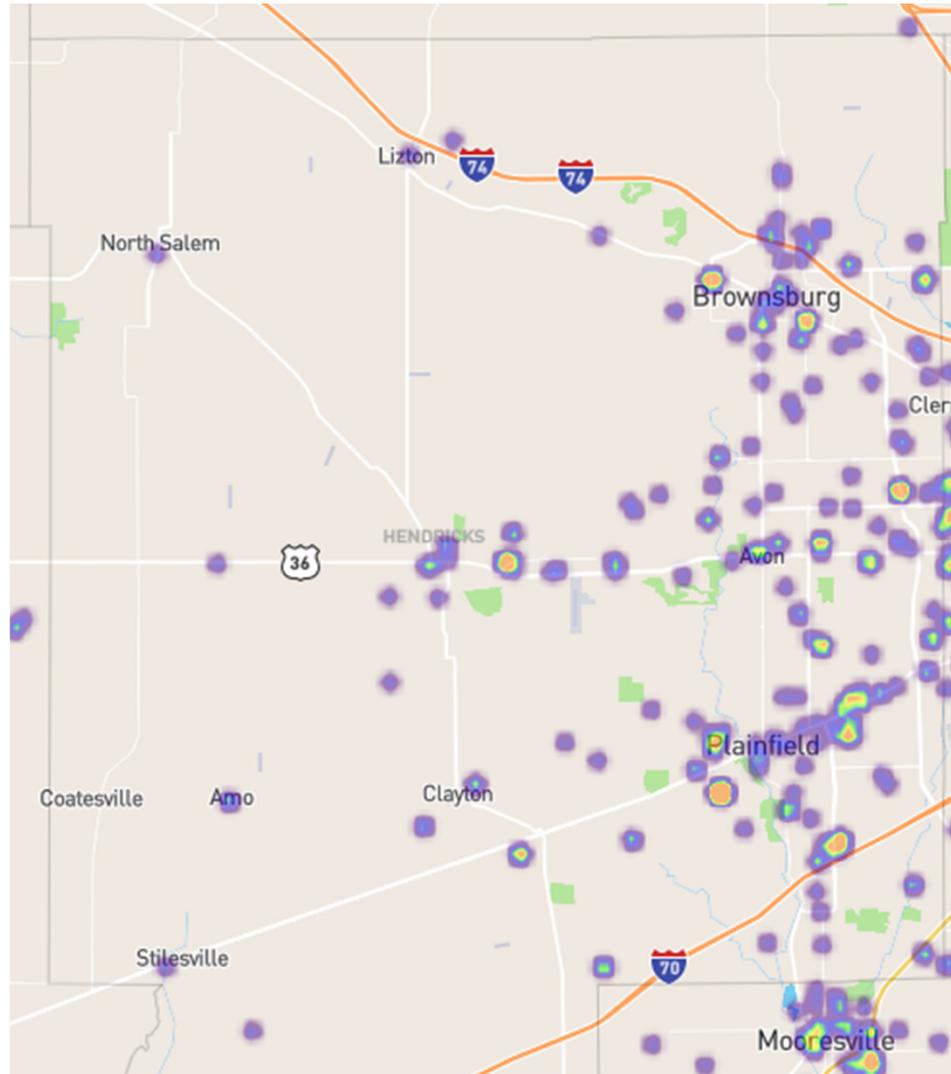


<sup>37</sup>Source: IDOH – 2021 Next Level Recovery Data Dashboard



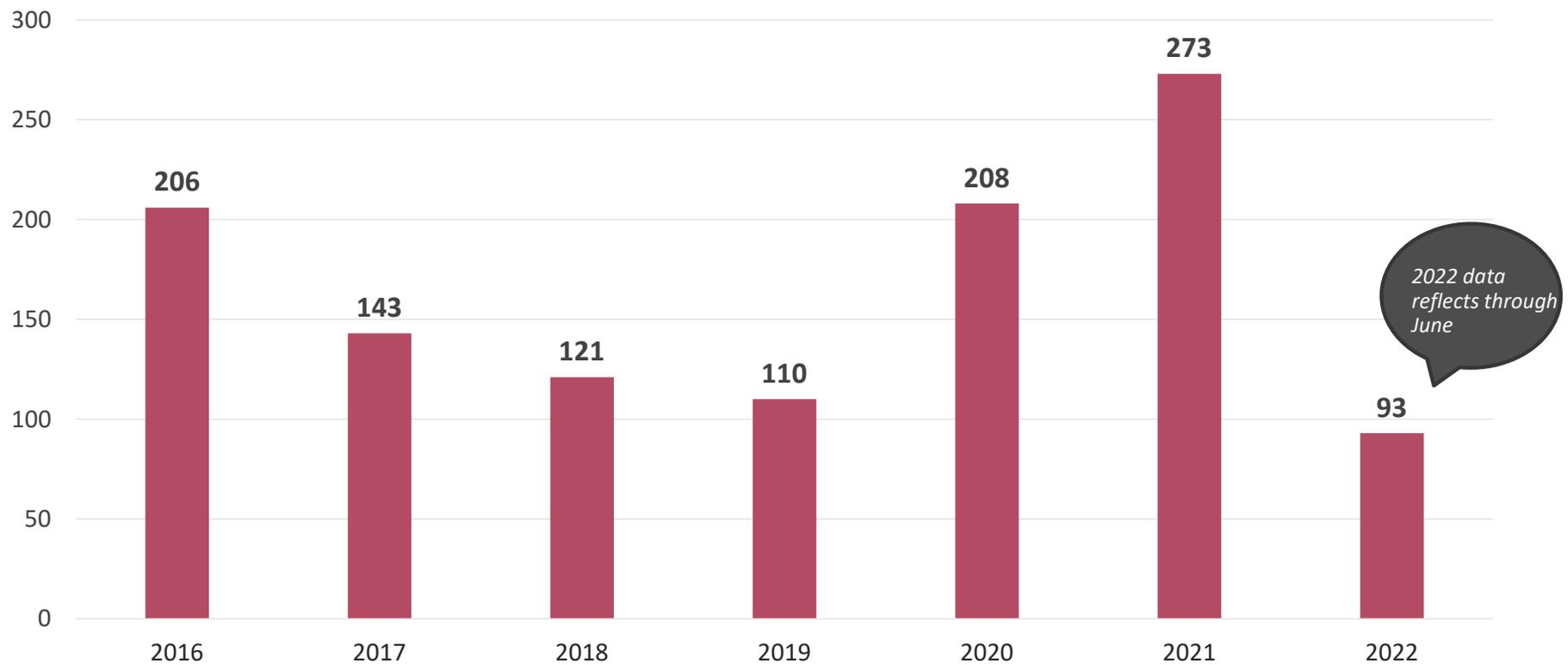
# Naloxone Administration Heat Map: Hendricks County (2021)

*Approximate locations reported by EMS*



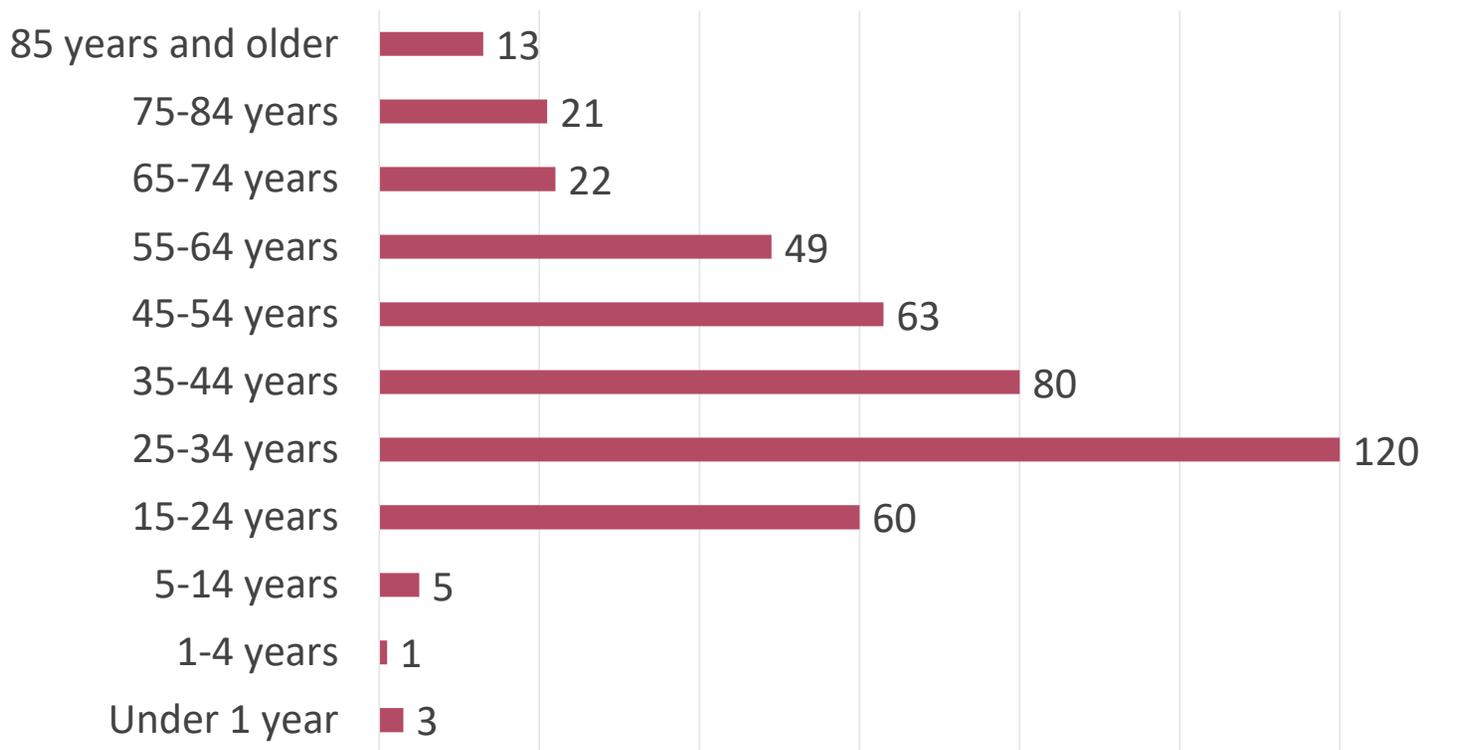
Source: IDOH – 2021 Next Level Recovery Data Dashboard

# EMS-Reported Naloxone Administration Incidents in Hendricks County, 2016-2022



Source: IDOH – 2021 Next Level Recovery Data Dashboard. <https://www.in.gov/recovery/data/>

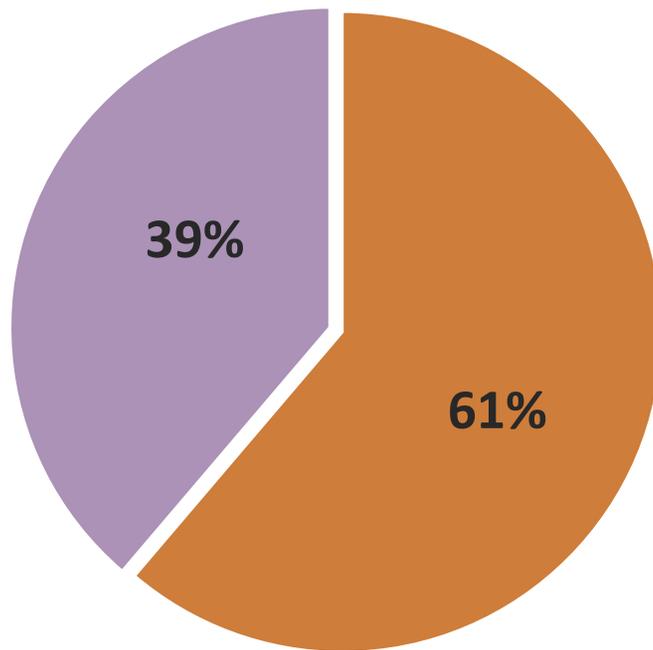
# EMS Naloxone administration by age in Hendricks County, 2021



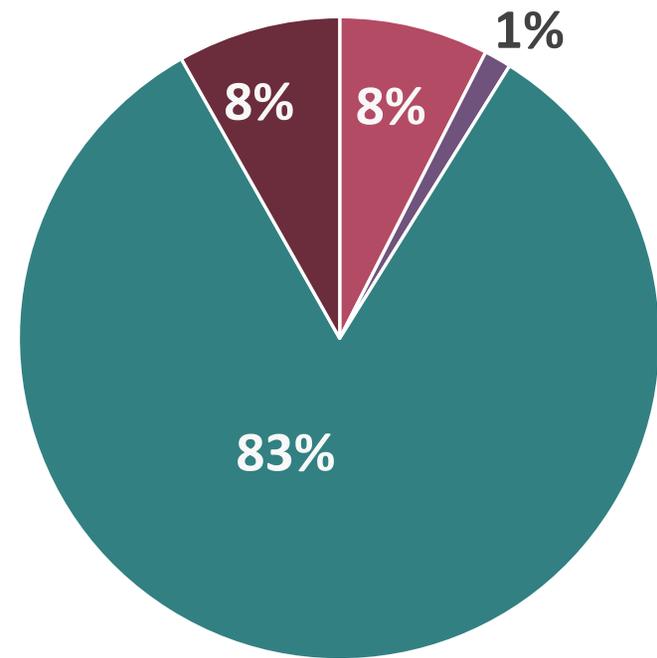
**437**  
*Total number of individuals receiving Naloxone administration (2021)*

<sup>40</sup>Source: IDOH – 2021 Next Level Recovery Data Dashboard. <https://www.in.gov/recovery/data/>

# EMS Naloxone administration by sex & race in Hendricks County, 2021



■ Male ■ Female

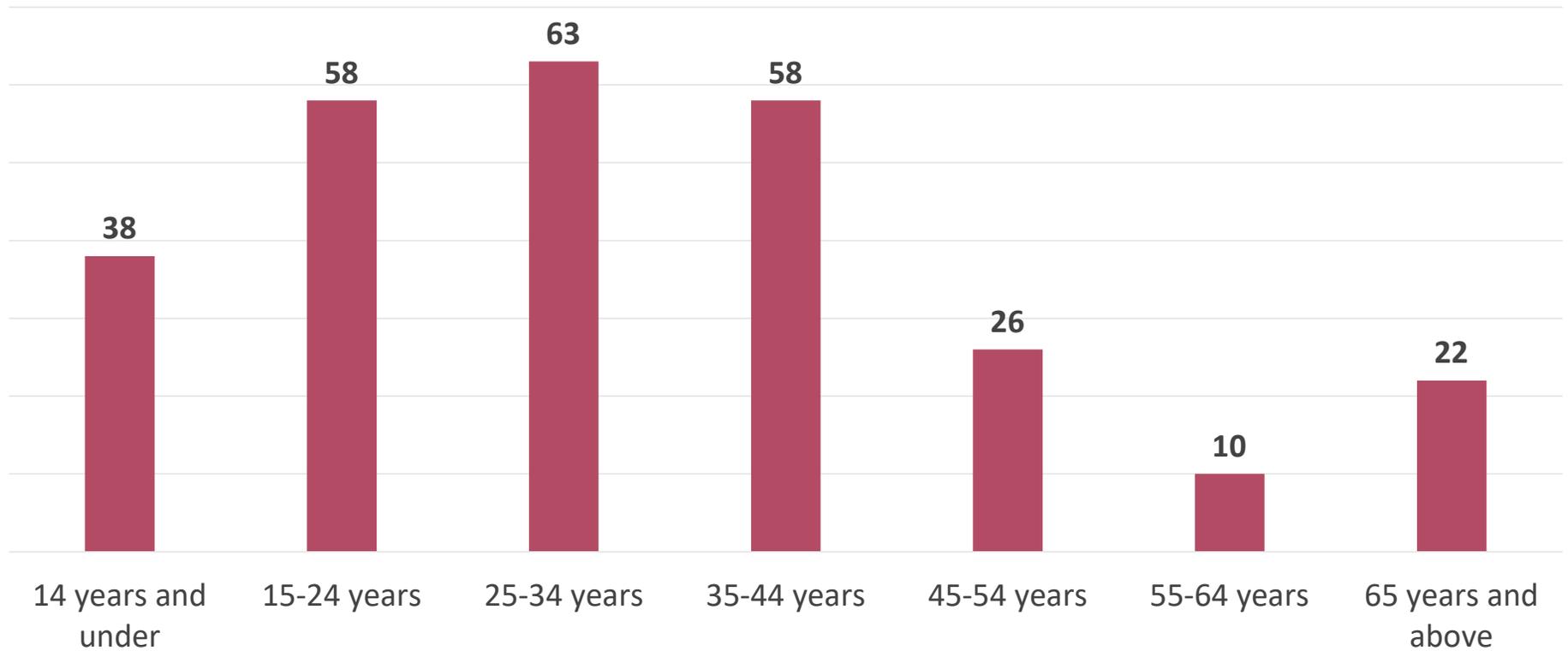


■ African American ■ Hispanic or Latino  
■ White (Non-Hispanic/Latino) ■ Other race

Source: IDOH – 2021 Next Level Recovery Data Dashboard.  
<https://www.in.gov/recovery/data/>



# Age-adjusted rate of ER visits for drug overdose per 100,000 Hendricks County residents, 2021



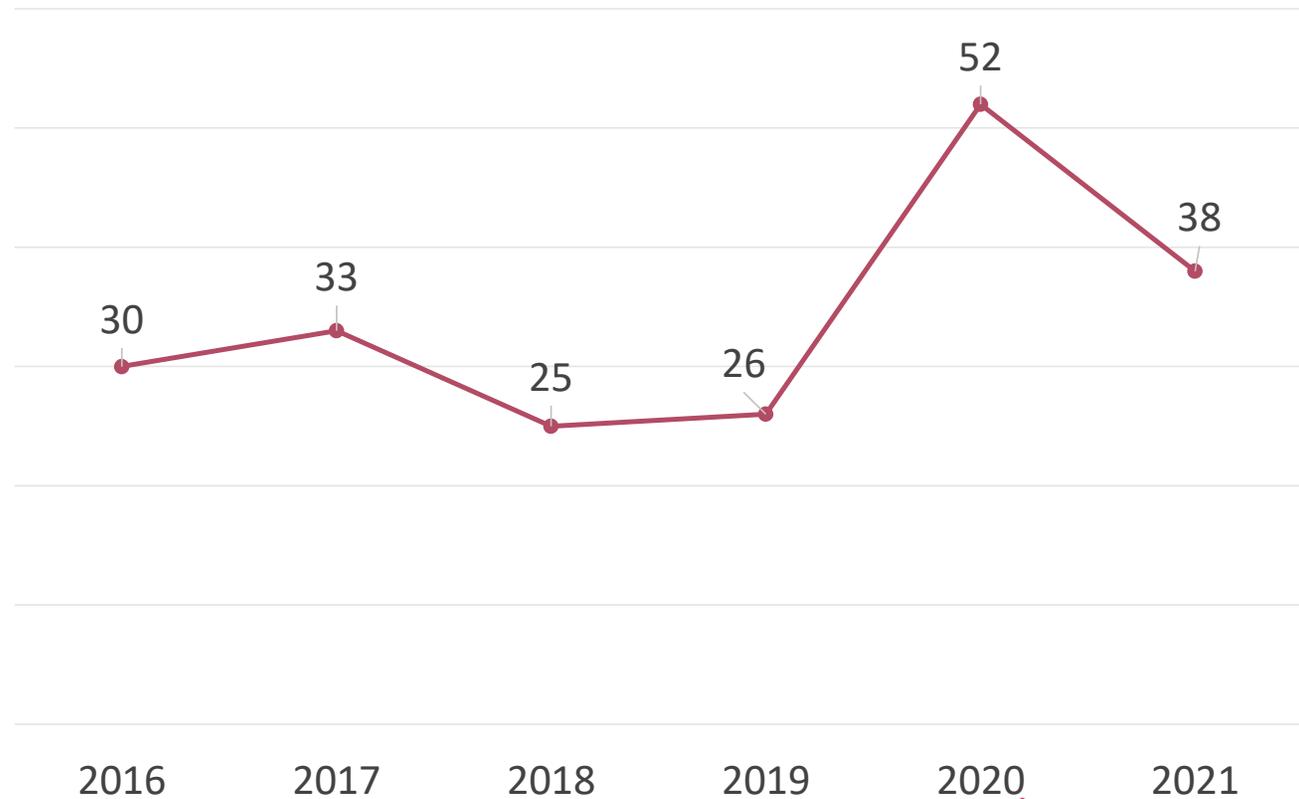
Source: IDOH – 2021 Next Level Recovery Data Dashboard. <https://www.in.gov/recovery/data/>

# Substance-related deaths in Hendricks County, 2016-2021

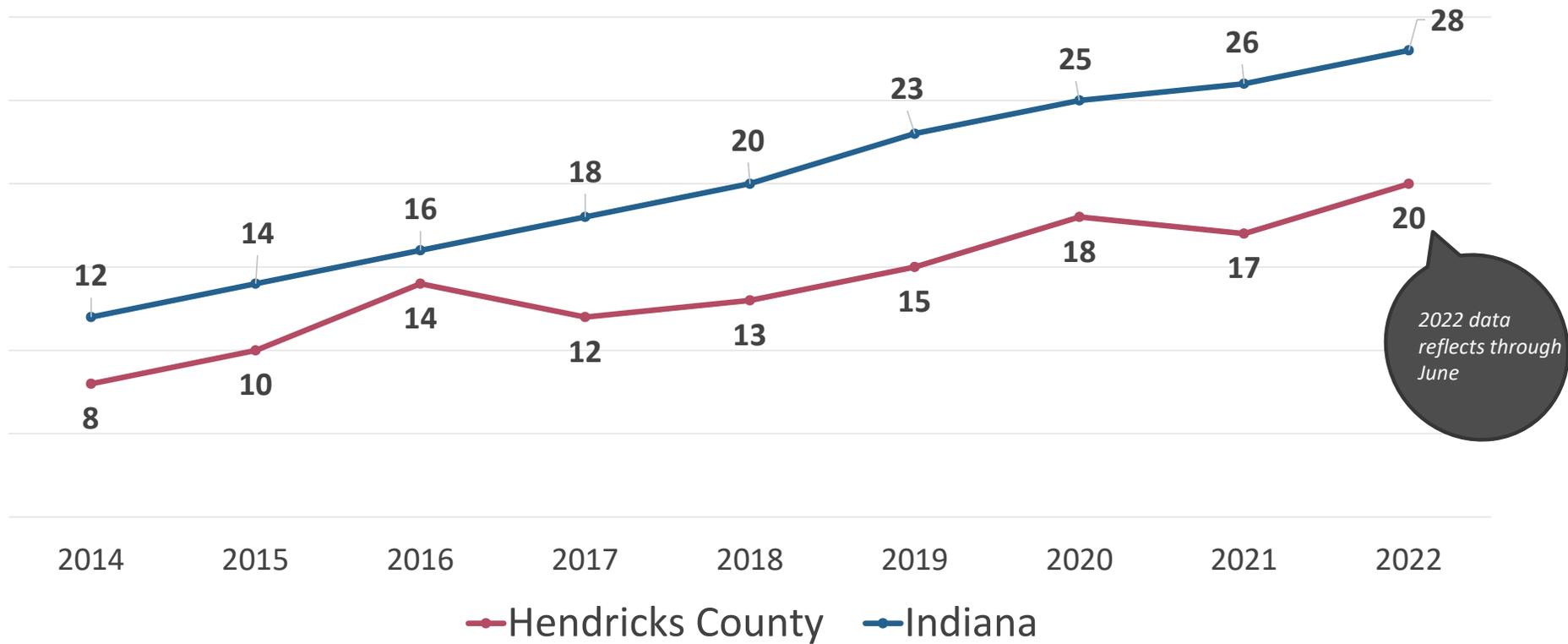
Opioids contribute to more deaths than any other substance in Hendricks County.

18–35-year-olds are the highest age category for people in Hendricks County who are dying by drug overdose.

Source: *Hendricks County 2019 Opioid Report*



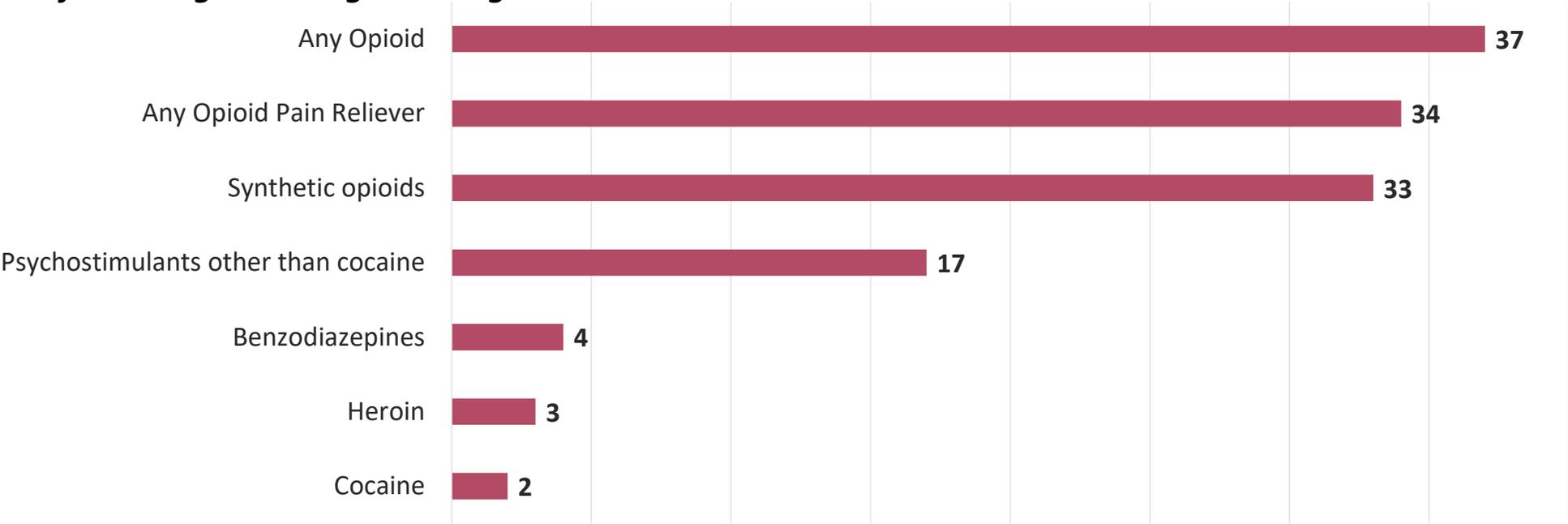
# Deaths involving drug overdose, per 100,000 population, 2014-2022



Source: IDOH – 2021 Next Level Recovery Data Dashboard. Accessed July 2022.

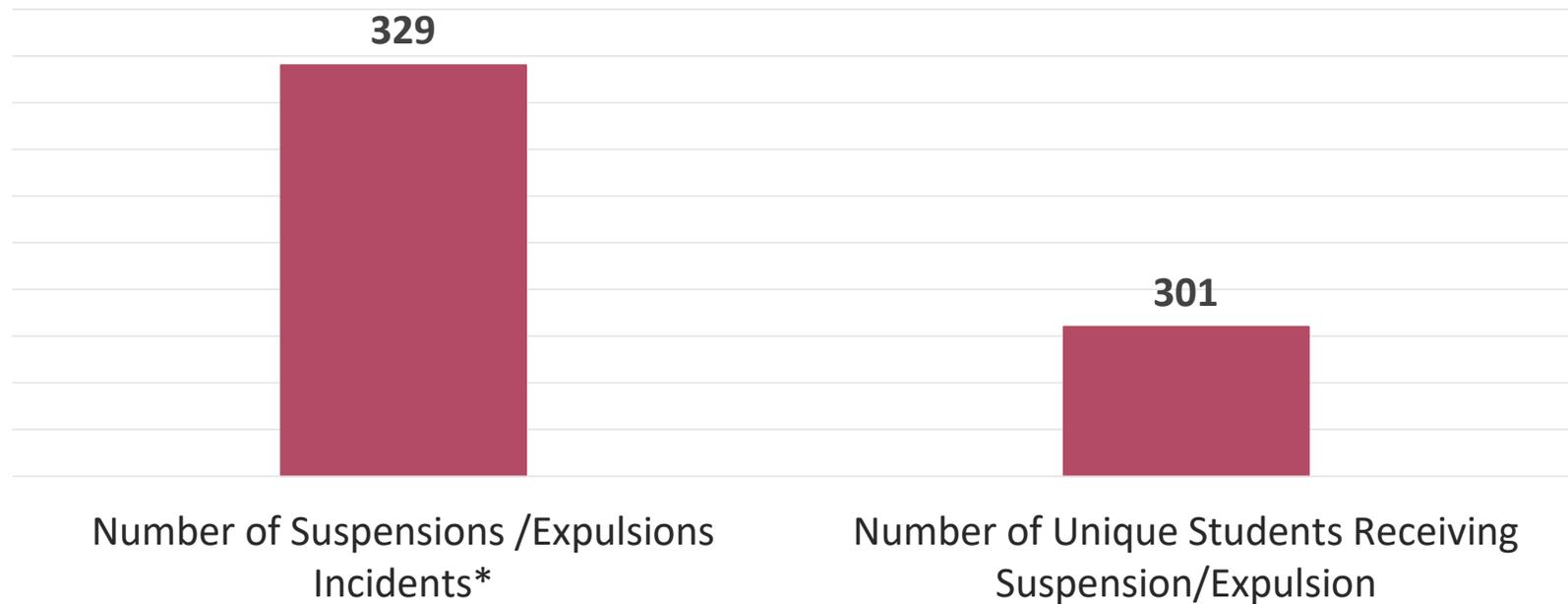
# Deaths from drug poisonings by type, Hendricks County, 2020

## Deaths from Drug Poisoning Involving:



Source: Indiana Department of Health – Next Level Recovery Data Dashboard. Accessed July 2022.  
<https://www.in.gov/health/erc/public-health-geographics/geographic-data/>

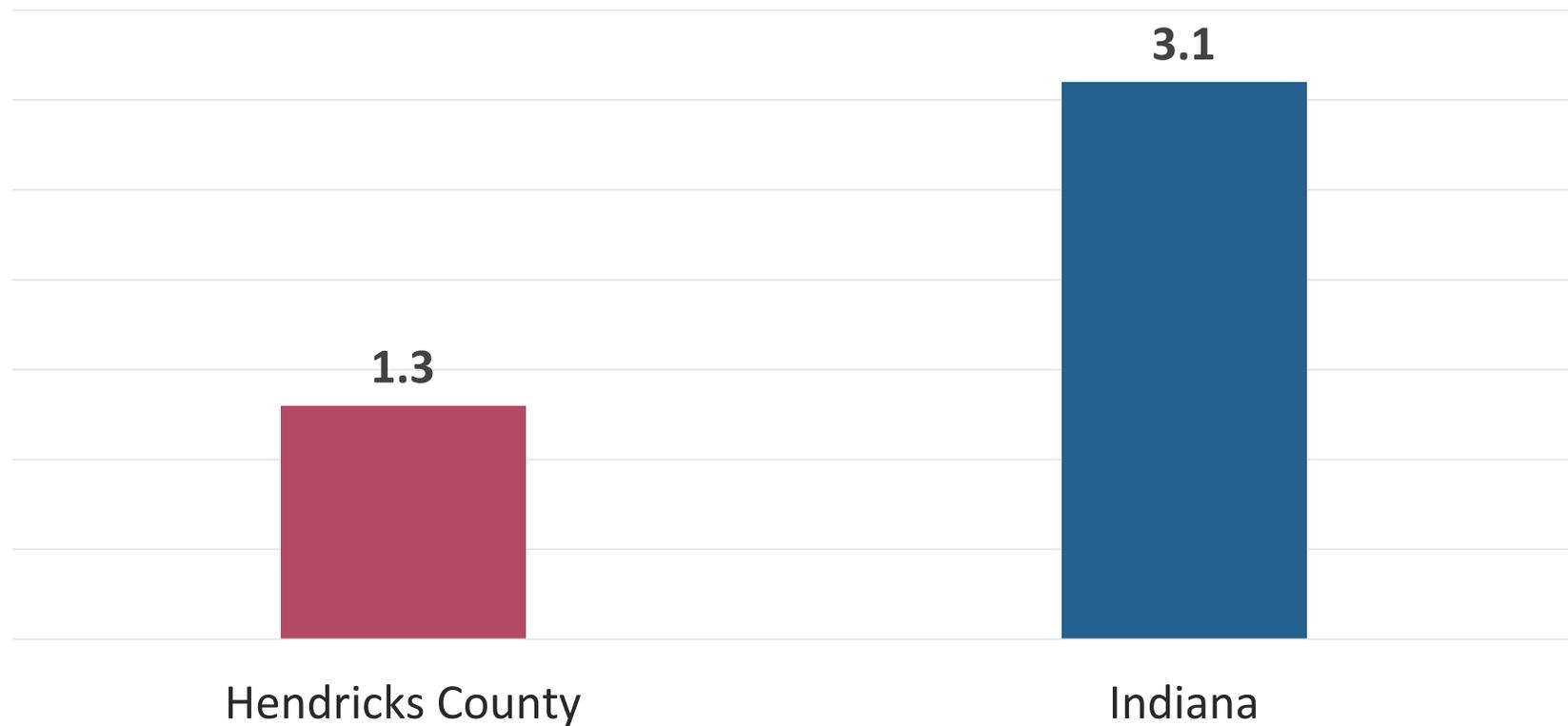
# Student suspensions / expulsions from school related to alcohol, tobacco &/or drug use in Hendricks County, 2021-2022 School Year



Source: Indiana Department of Education. Accessed July 2022. <https://iprc.iu.edu/epidemiological-data/>

\*Note: Includes in-school and out-of-school suspensions, and expulsions. The number of incidents counts each time a student is suspended/expelled during the school year; the number of unique students counts a student only once even if they received more than one suspension/expulsion during the school year.

# Rate of child victims of abuse and neglect per 1,000 children under 18 years, 2021



Source: Indiana Department of Education. Accessed July 2022. <https://iprc.iu.edu/epidemiological-data/>

# Number of children removed from home due to parent alcohol and/or drug abuse, 2021

Hendricks County	Indiana
20	4,581

Source: Indiana Department of Child Services. Accessed July 2022. <https://iprc.iu.edu/epidemiological-data/>

\*Note: Counts and percentages may underrepresent removals that involve parental alcohol and/or drug abuse as data rely on parent alcohol and/or drug abuse being selected as a removal reason. There may be instances in cases where alcohol and/or drug abuse is present but not selected as a removal reason.

**There were 0 methamphetamine laboratory seizures in Hendricks County during 2021.**

Source: Indiana Department of Education. Accessed July 2022. <https://iprc.iu.edu/epidemiological-data/>

***...the majority of respondents (53.7% ) indicated they were either unsure or unaware of any mental health resources in Hendricks County.***

Source: [Hendricks County Health Partnership 2020 COVID Impact Mental Health Survey](#)

**Survey responses:**

# **Community Needs Survey Results**

# Survey goal & promotion

The primary goal of the Community Health Assessment is to obtain a diverse and accurate health profile of our county that we can use to identify areas that need improvement, helping our community know where to direct efforts.

Anyone who lives, works, or plays in Hendricks County was eligible to participate in the anonymous online survey, which was available from June 28 to September 1, 2022.

To promote survey participation, Danville schools shared the survey link with families in their community, Plainfield schools shared the link on social media, and Brownsburg schools shared it internally with staff.

Community partners, including hospitals, food pantry coalitions, churches, apartment complexes, nonprofit organizations, and libraries, were invited to promote survey participation by sharing information with clients they serve. Paper copies of the survey were also provided to make it more accessible for older populations and people who may not have consistent access to computers / phones / internet.

The Hendricks County Health Department also featured the survey in its public health clinic.

# Who responded?

- Total of **578 survey participants** from 53 zip codes across 10 counties:

*Boone*

*Hamilton*

*Hancock*

*Hendricks (N = 382\*)*

*Johnson*

*Marion*

*Montgomery*

*Morgan*

*Putnam*

*Shelby*

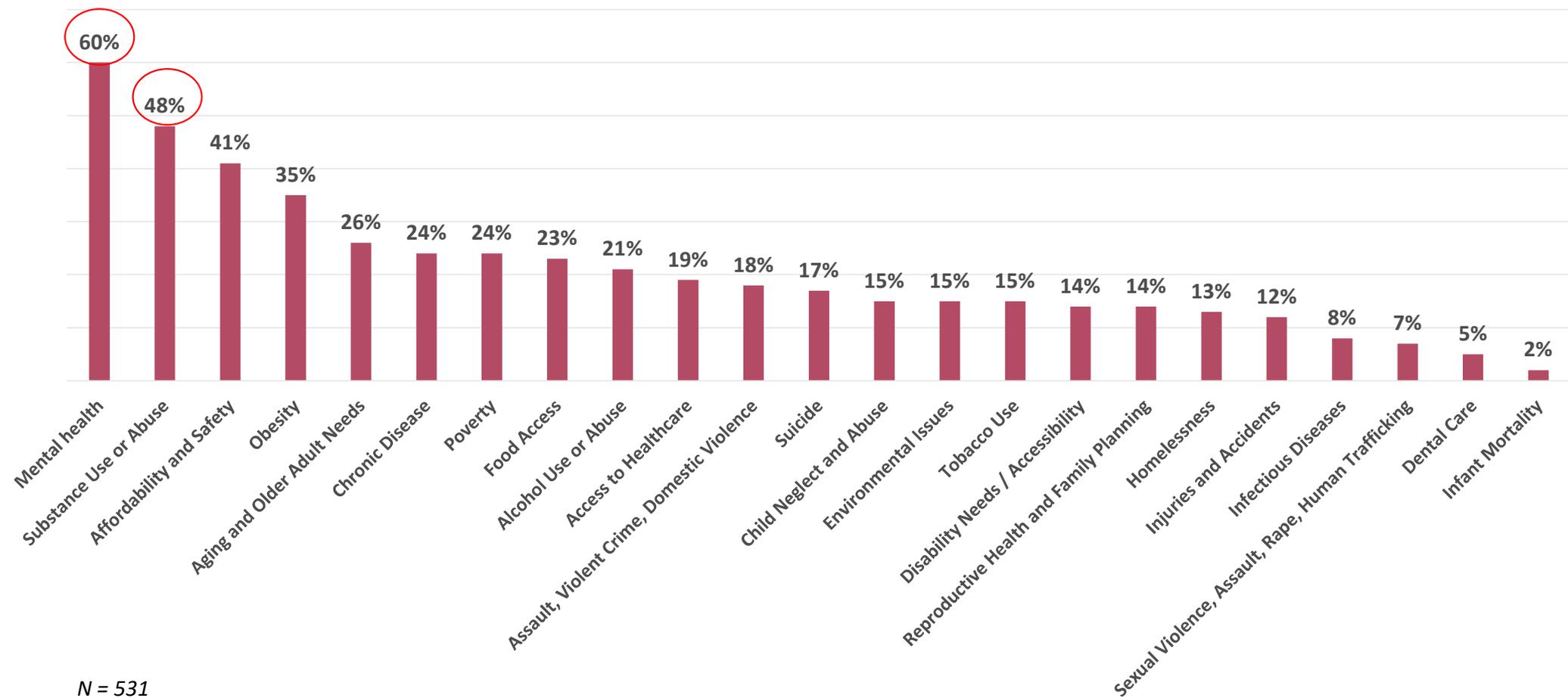
*\*Some zip codes cross county lines; therefore, the number of Hendricks County respondents could be higher – only zip codes exclusively in Hendricks County were included in this tally.*

*Answers were not required in this survey; therefore, the number of responses sometimes range based on who chose to answer a particular question.*

**Survey responses:**

# **Perception of community needs**

## Community issues of greatest concern for Hendricks County residents

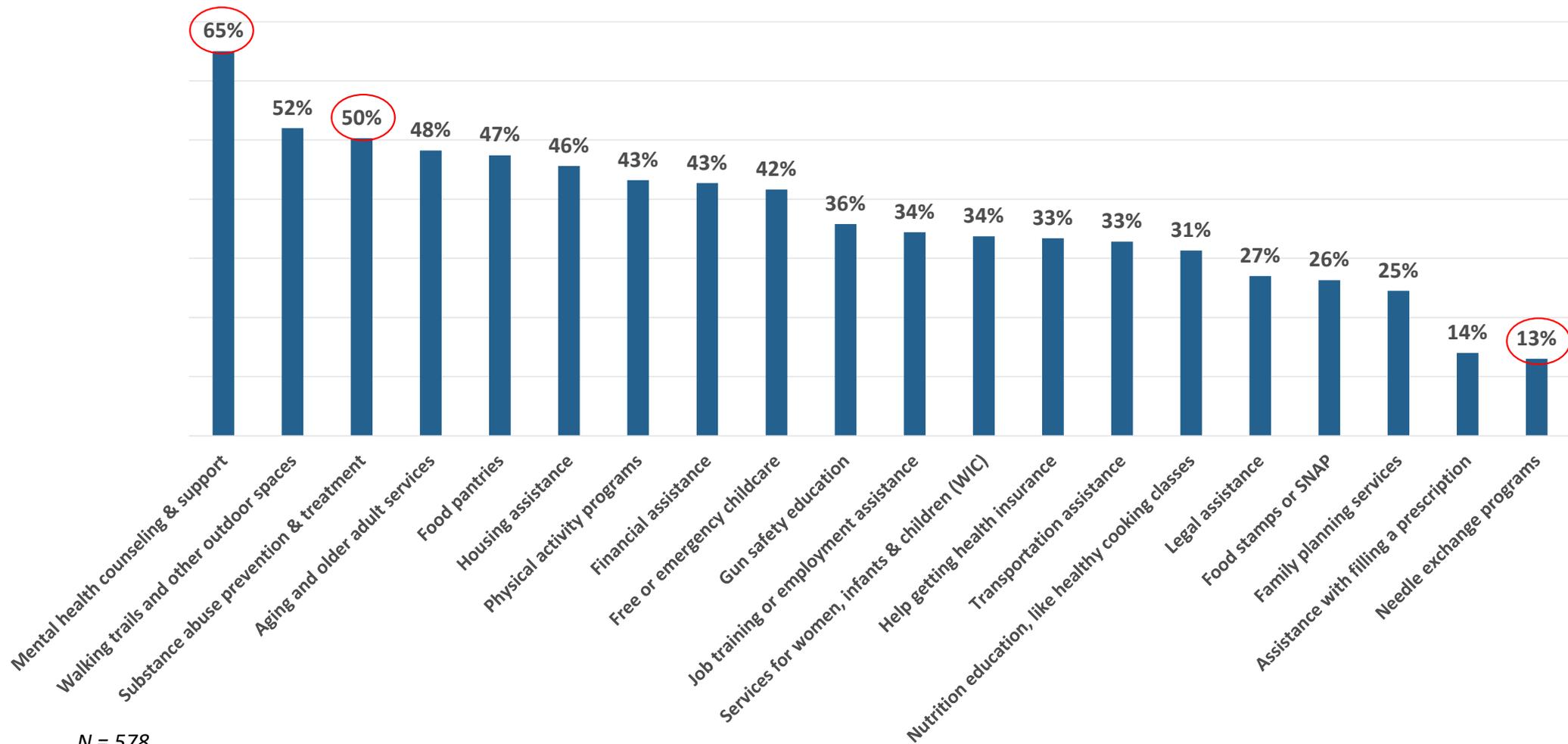


N = 531

Respondents were asked to select the **five** issues they thought pose the greatest concern for people who live in their community.

Survey responses containing more than 5 answers were eliminated from this analysis. Some people selected fewer than five; these responses are included.

## What programs do you think are most important in your community?



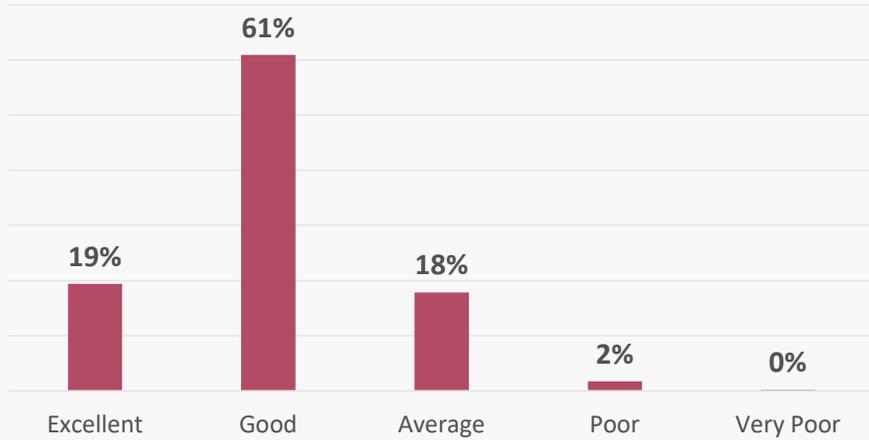
N = 578

The number of selections was unrestricted; respondents could choose as many as they felt were applicable.

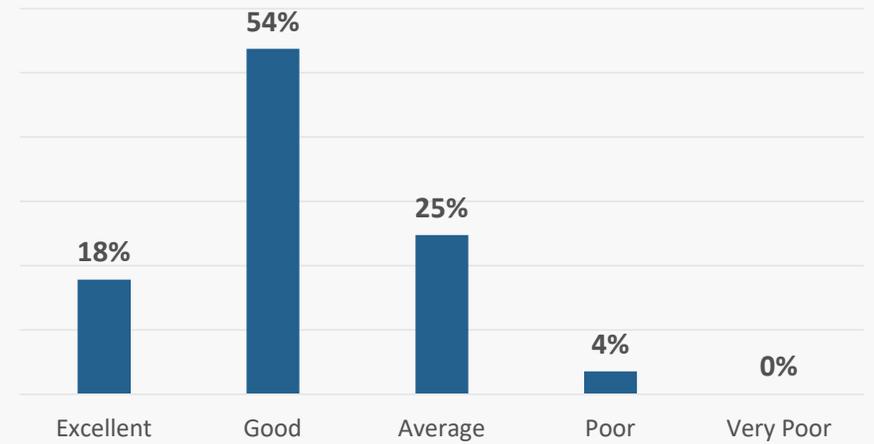
**Survey responses:**

# **Personal health & wellness**

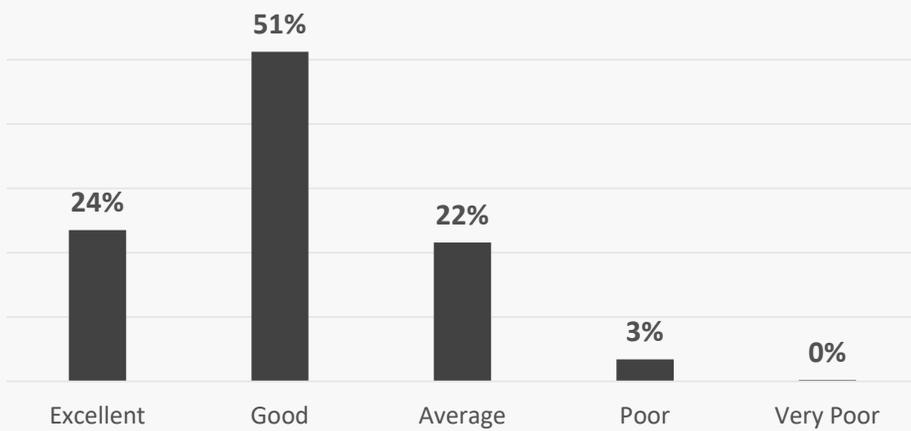
### How would you generally rate your overall health?



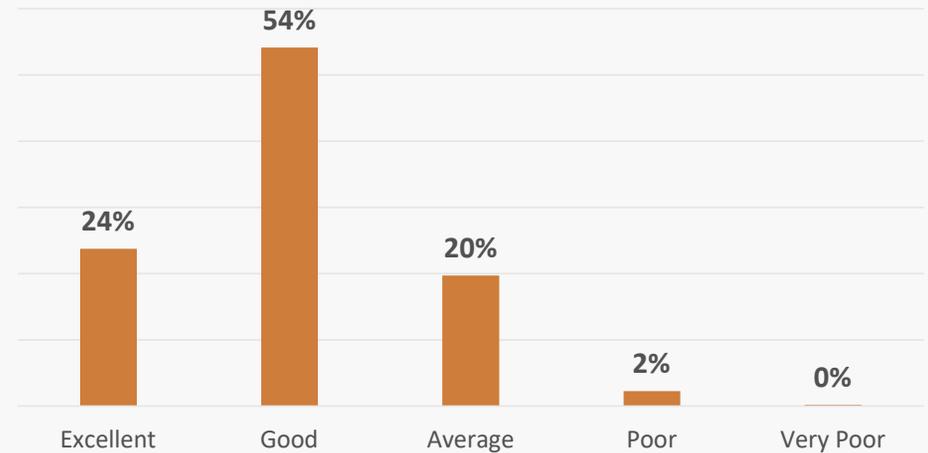
### How would you generally rate your physical health?



### How would you generally rate your mental health?

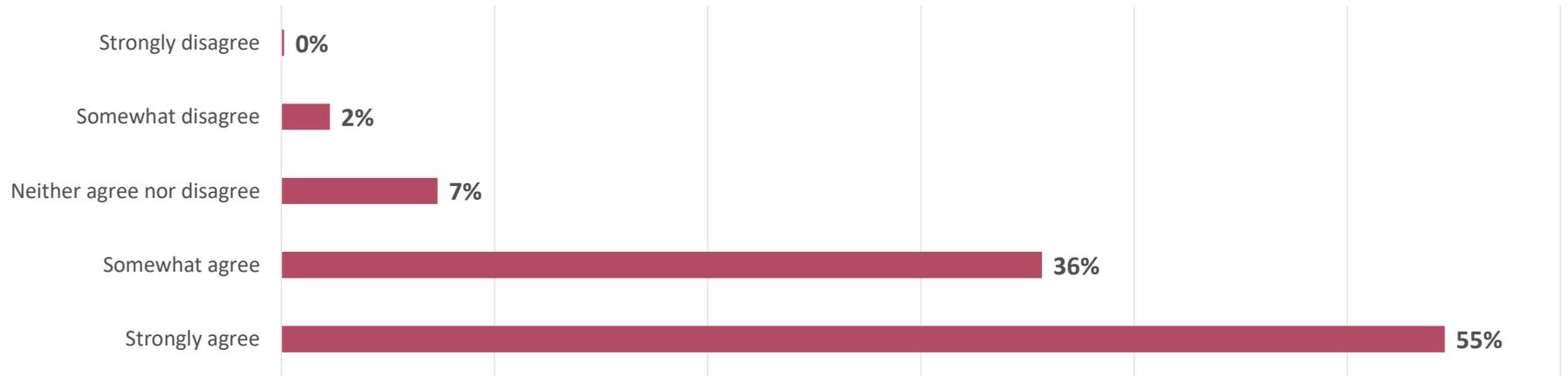


### How would you generally rate your social well-being?



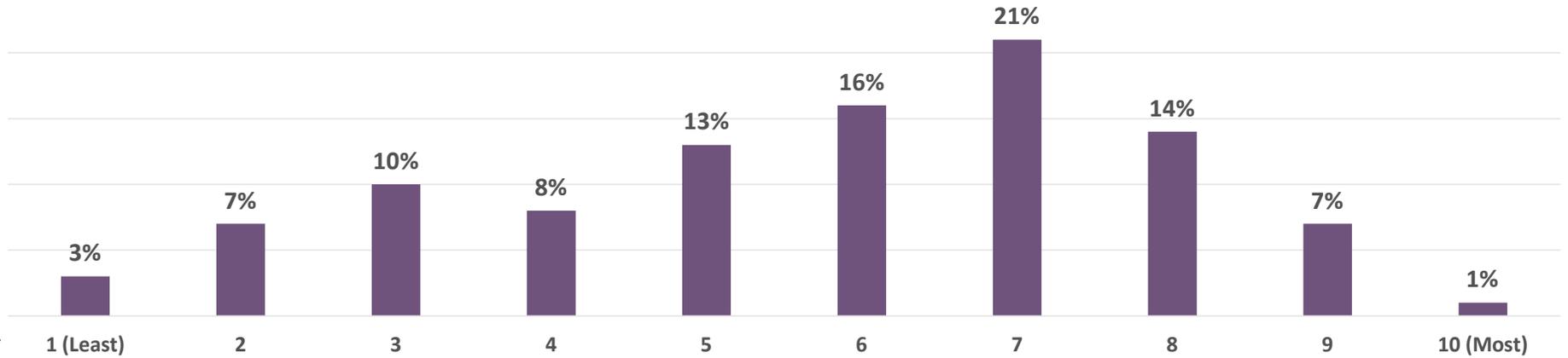
N = 578

How much do you agree with the following statement:  
"In general, I am satisfied with my life."



N = 578

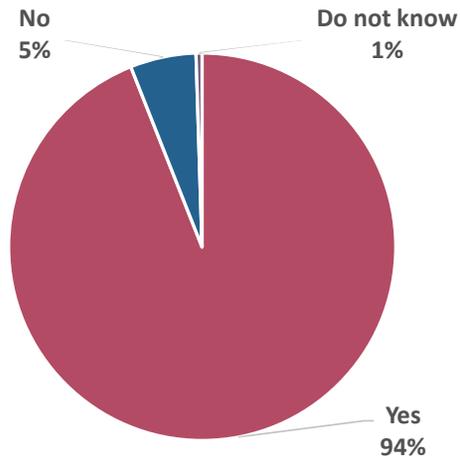
Self-reported stress level



N = 575

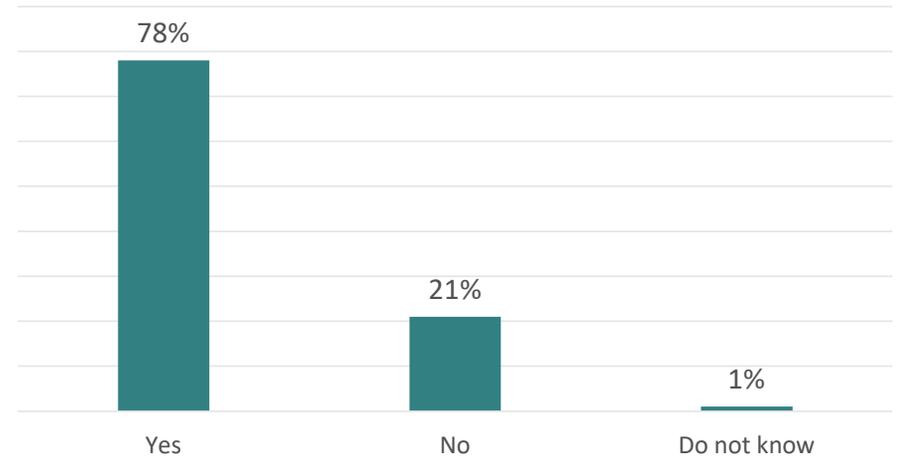
**Survey responses:**  
**Medical care**

Do you currently have insurance or coverage that helps with your healthcare costs?

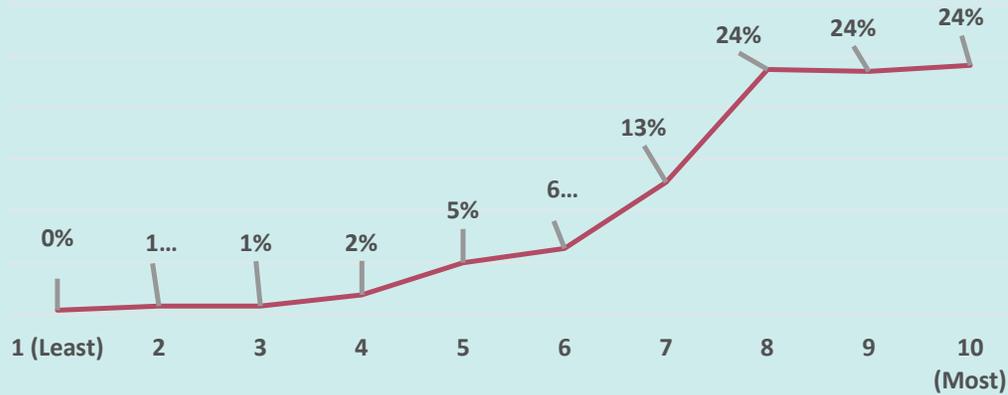


N = 578

Do you currently have a personal doctor or healthcare provider?

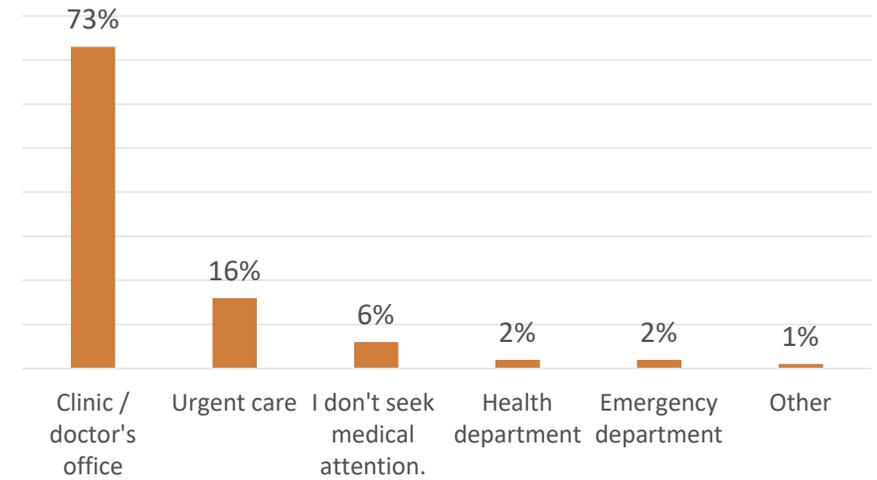


Rate the amount of trust you have in your personal doctor/healthcare provider.

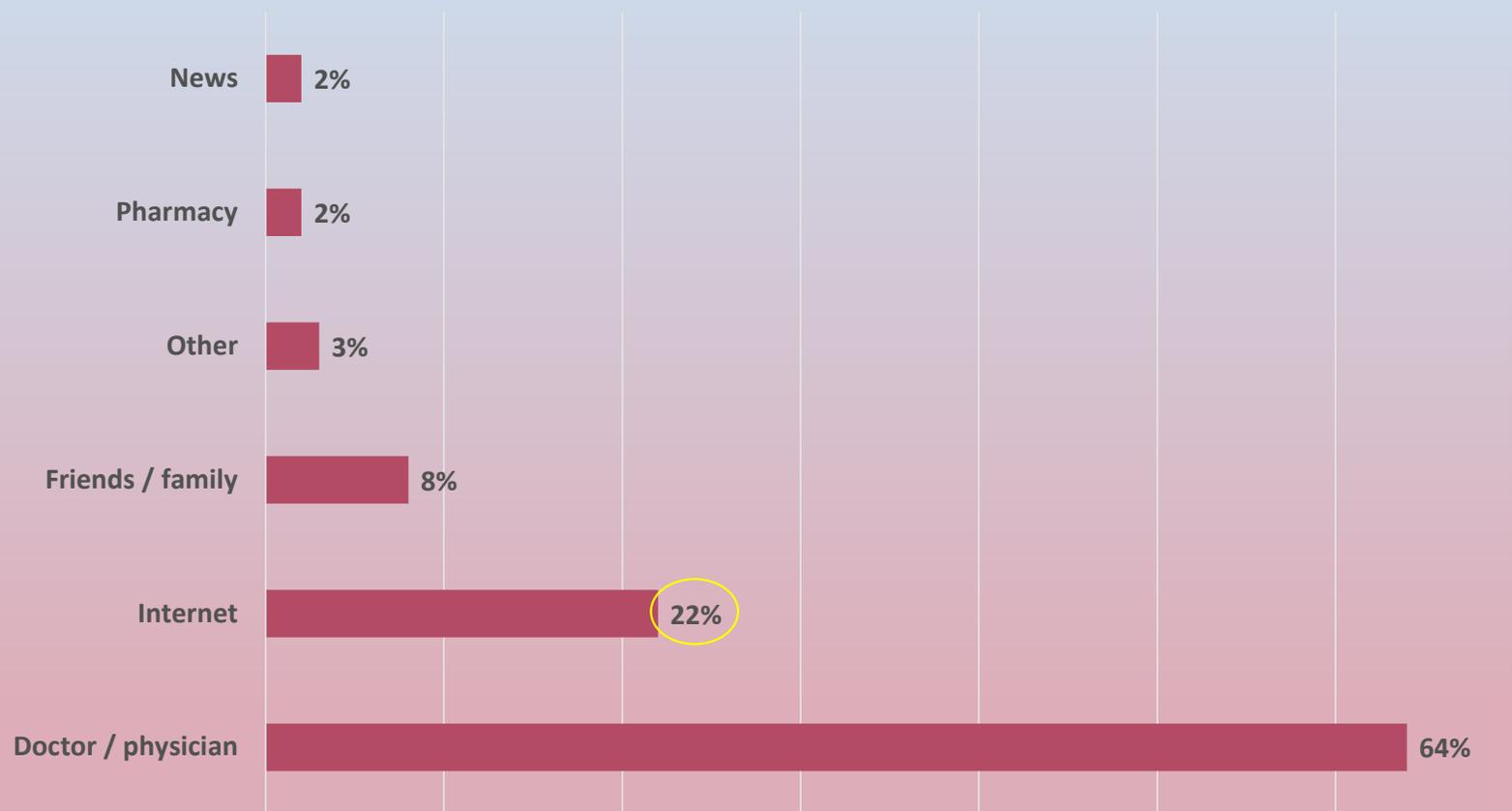


N = 451

When you get sick, where are you most likely to go first?

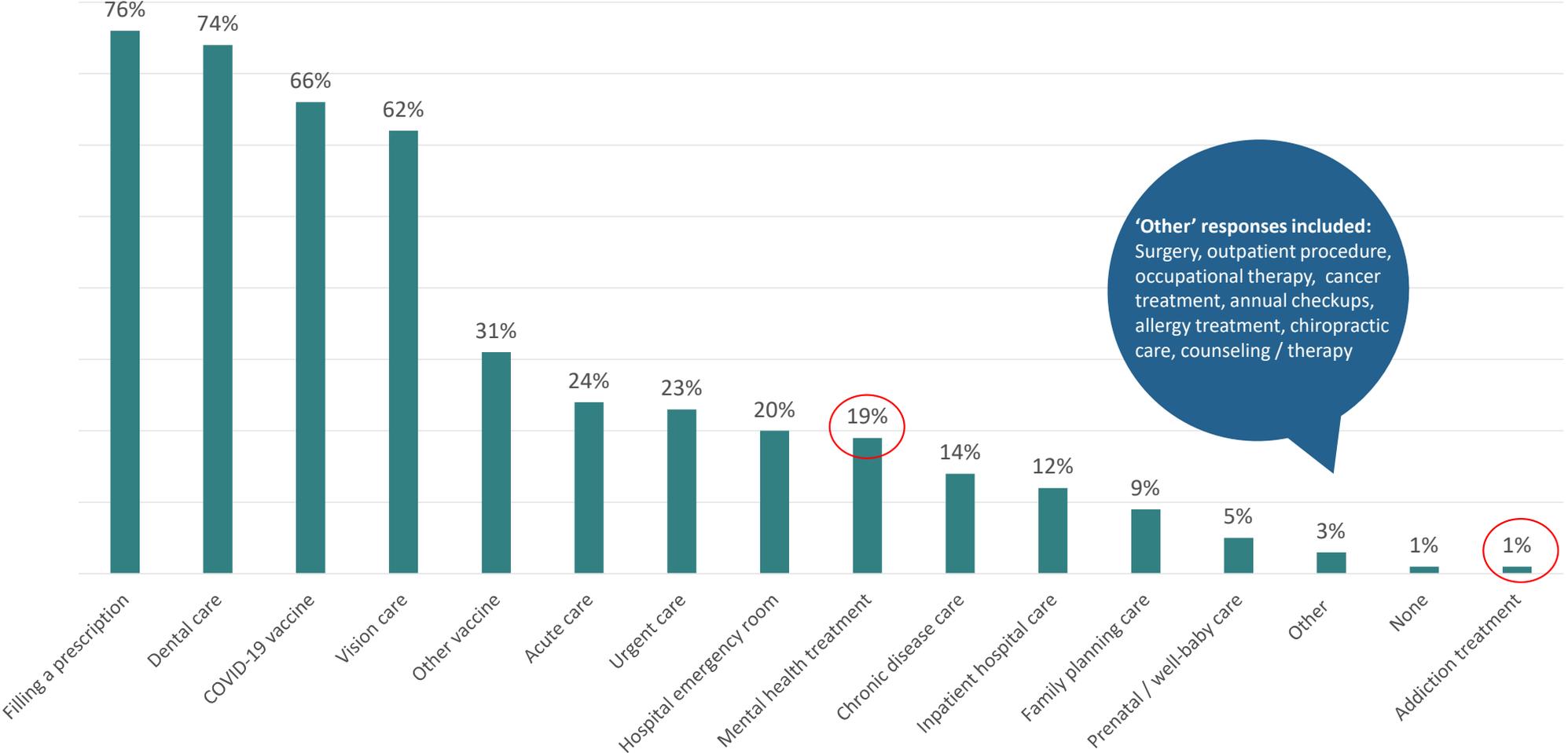


## Where do you get most of your medical information?



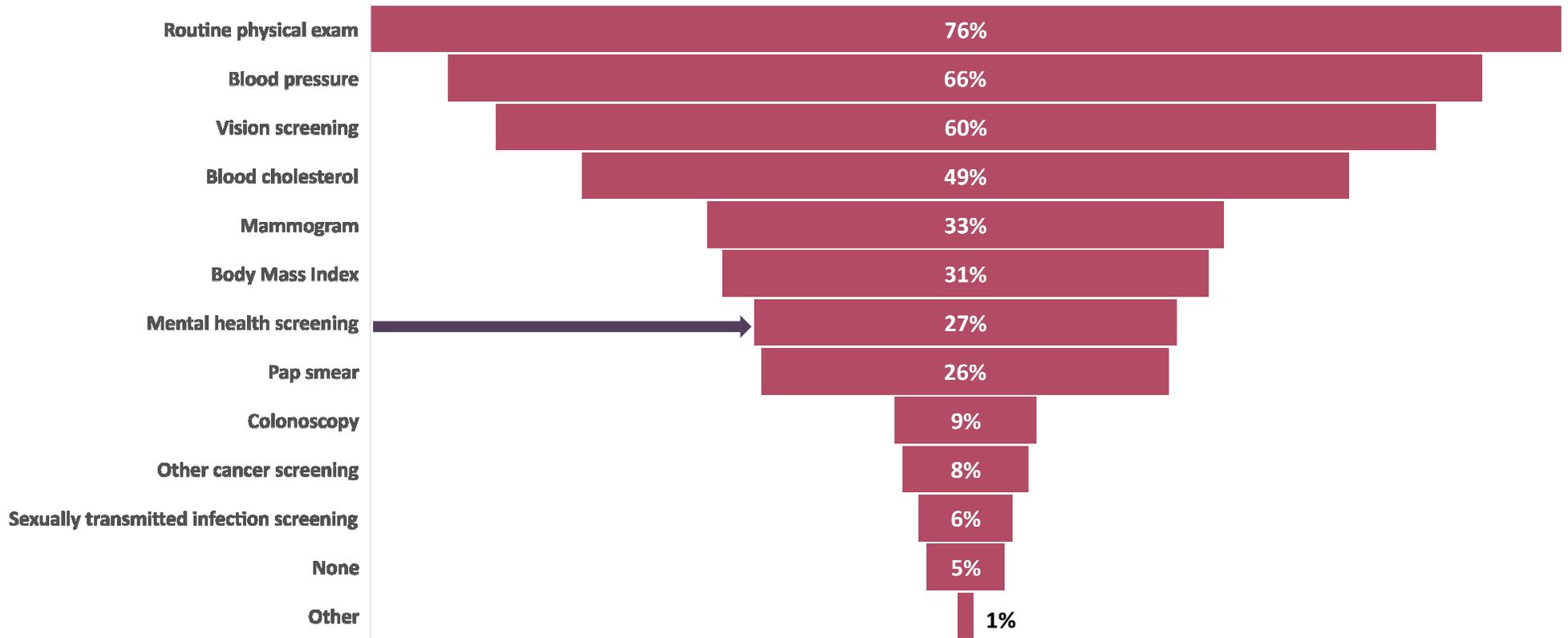
N = 578

### Within the past 12 months, which of the following health services have you received?



N = 578

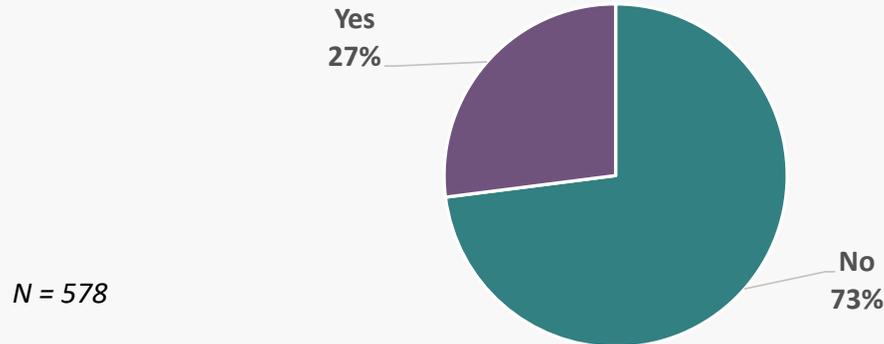
## Within the past 12 months, which of the following health screenings have you received?



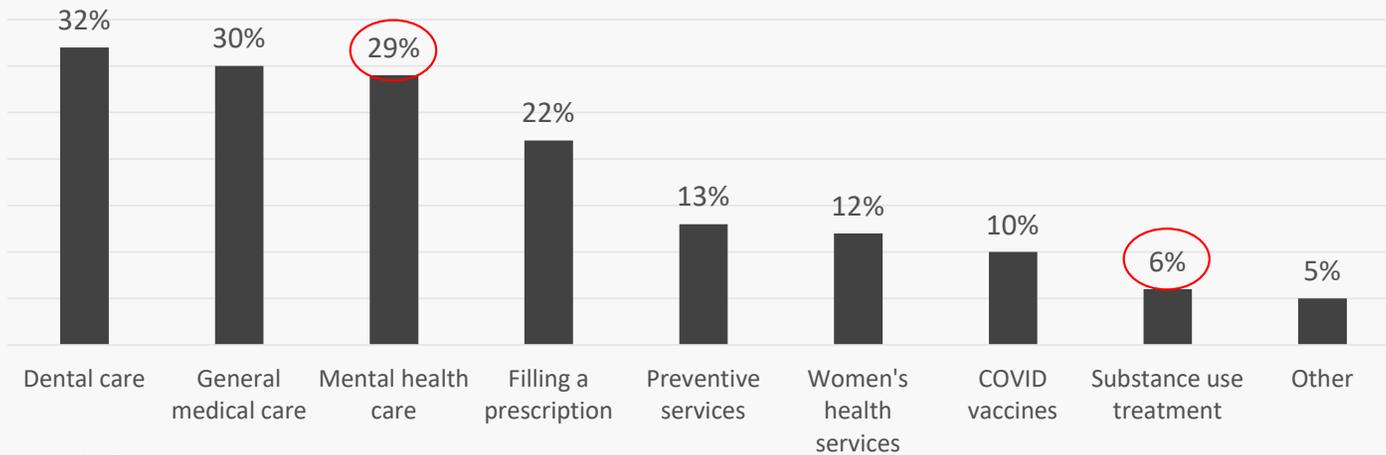
**'Other' responses included:** Diabetes checkup, bone density screening, bloodwork for fertility analysis, electrocardiogram (EKG)

N = 578

### In the past year, was there a time when you needed a service but were not able to get it?

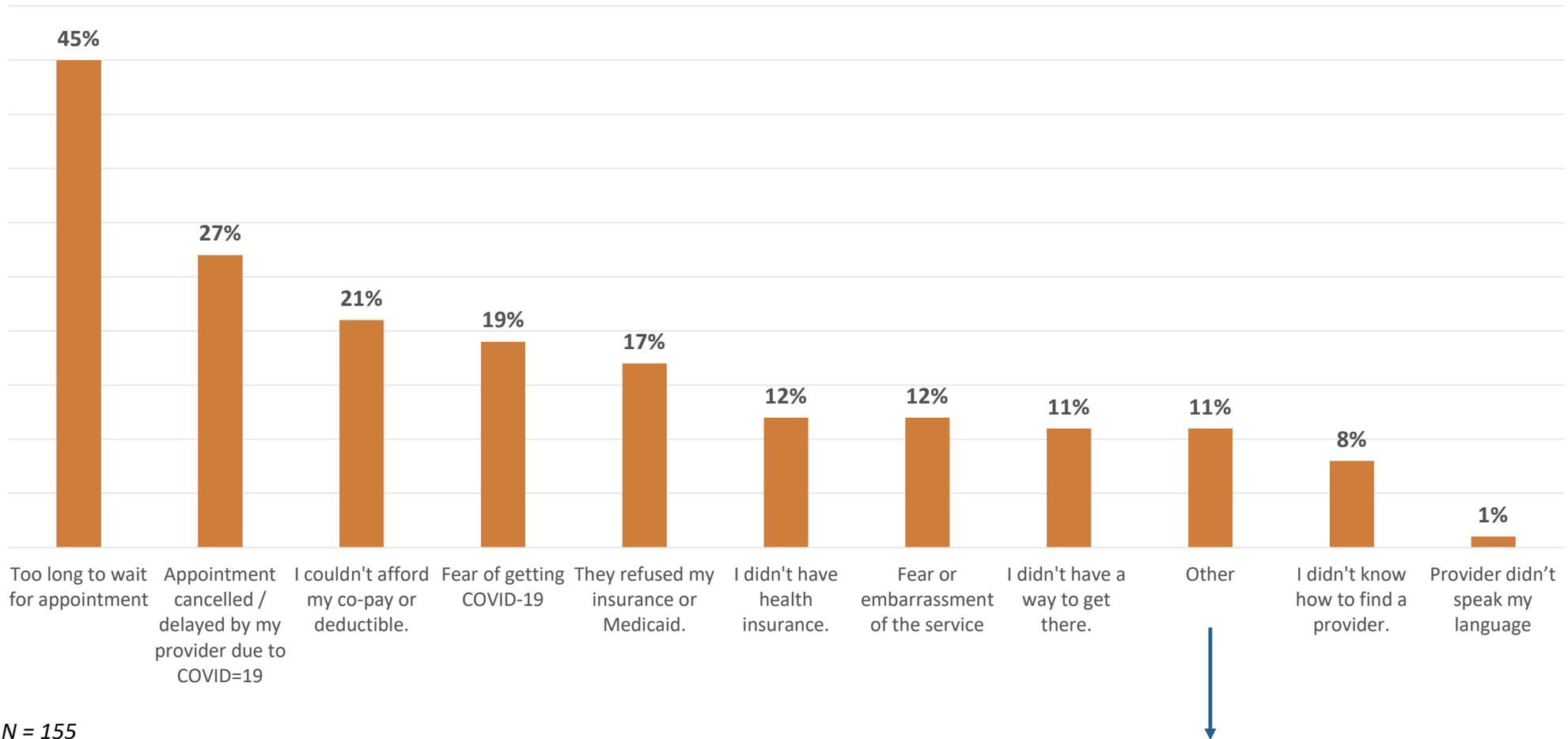


### If yes, which type(s) of care were you unable to get?



**'Other' responses included:**  
Gastroenterology services, vision care, specialist care (unspecified), hysterectomy surgery

### Why were you not able to get care? (follow up question)



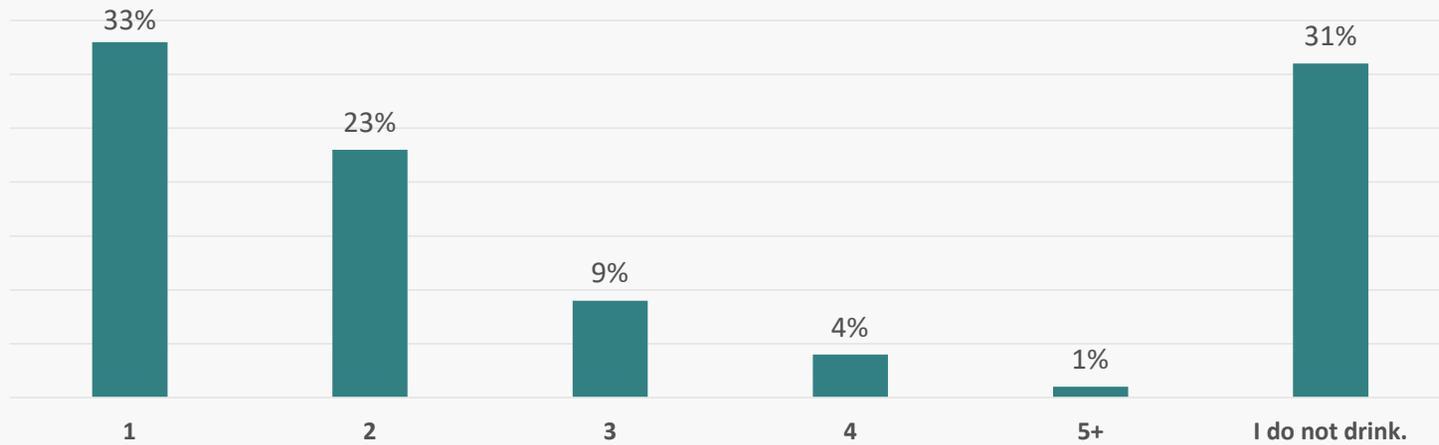
N = 155

**'Other' responses included:** Staff shortage, providers not accepting new patients and/or long wait times, pharmacy closed or with shortened hours, insurance didn't cover service (mentioned in relationship to mental health care and more broadly)

**Survey responses:**

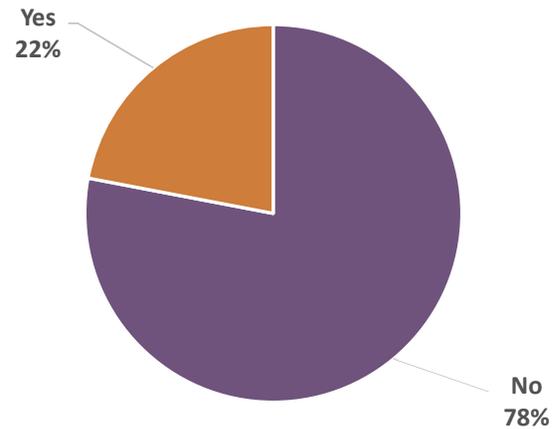
**Substance use**

### How many alcoholic drinks do you typically consume in one sitting?



### Have you used any of the following substances in the past 12 months?

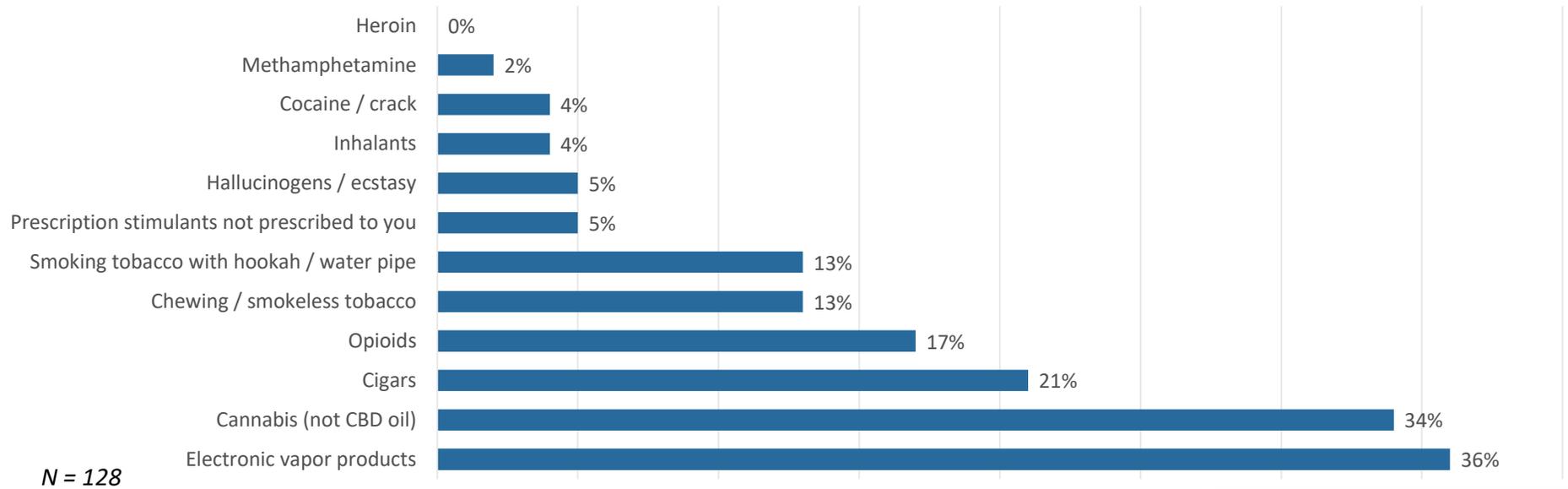
- Electronic vapor products
- Cannabis (not CBD oil)
- Cigars
- Opioids
- Chewing / smokeless tobacco
- Smoking tobacco with hookah / water pipe
- Prescription stimulants not prescribed to you
- Hallucinogens / ecstasy
- Inhalants
- Cocaine / crack
- Methamphetamine
- Heroin



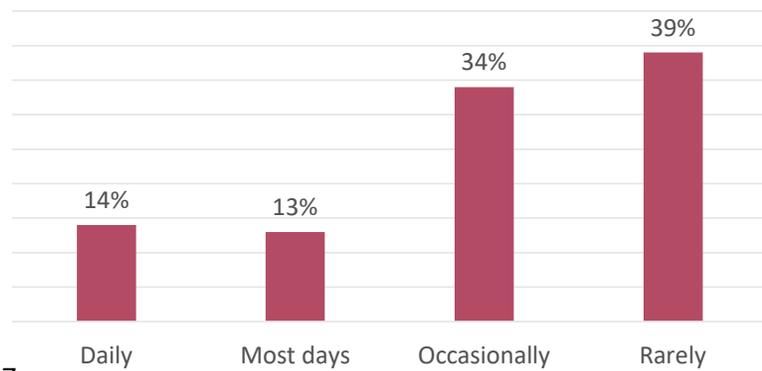
N = 578

Continued on next page

## Substances used by people who reported use in the past 12 months



## How frequently have you used the substances selected above?



### *Of the people who report using substances daily: (N = 18)*

- 8 people report using electronic vapor products
- 4 people report using cannabis
- 3 people report using opioids
- 3 people report using prescription stimulants not prescribed to them
- 2 people report using hallucinogens / ecstasy
- 1 person reports using chewing / smokeless tobacco
- 1 person reports using smoking tobacco

### *Of the people who report using substances most days: (N= 16)*

- 6 people report using chewing / smokeless tobacco
- 6 people report using electronic vapor products
- 5 people report using smoking tobacco
- 3 people report using cigars
- 3 people report using cannabis
- 1 person reports using hallucinogens / ecstasy
- 1 person reports using opioids

# Information Gathering Sessions

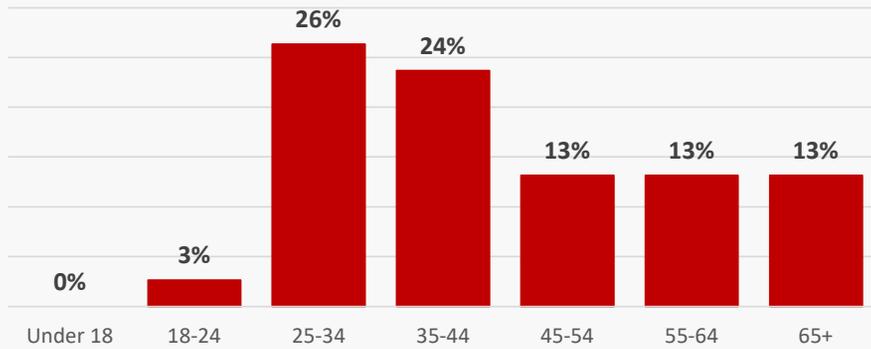
# Who participated?

- 80 people
  - 6 Were Seniors*
  - 29 Are engaged in criminal justice*
  - 5 in long term recovery*
  - 11 in long-term recovery for substance use disorder*
  - 8 Work in behavioral health*
  - 15 Were from the general public*
  - 6 No group identification*
- 29 identified gender
  - 17 Female
  - 18 Male
- 37 identified race
  - 89% white (33 people)
  - 8% black (3 people)
  - 3% other (1 person)
- No Hispanic people responded
- 2 people identified as disabled

From the summary information:

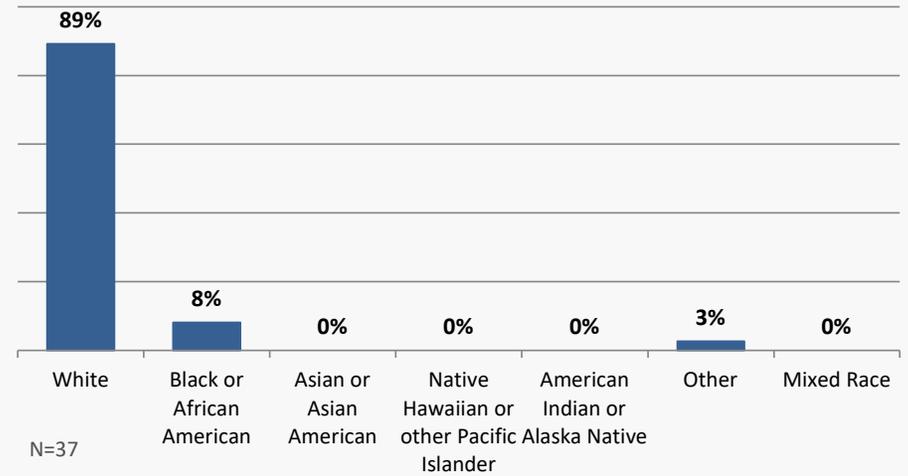
4 additional people of color, 1 Indian (country) person, and 11 white people

### Age of community input session participants



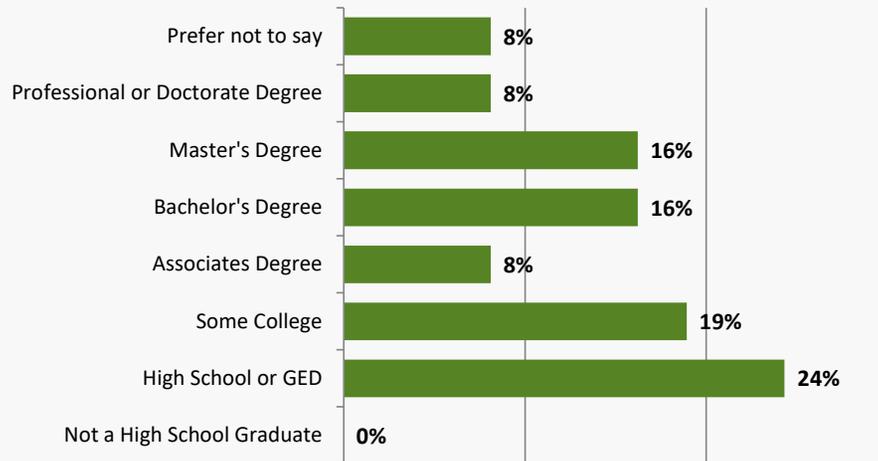
N=38

### Race of community input session participants



N=37

### Education of community input session participants



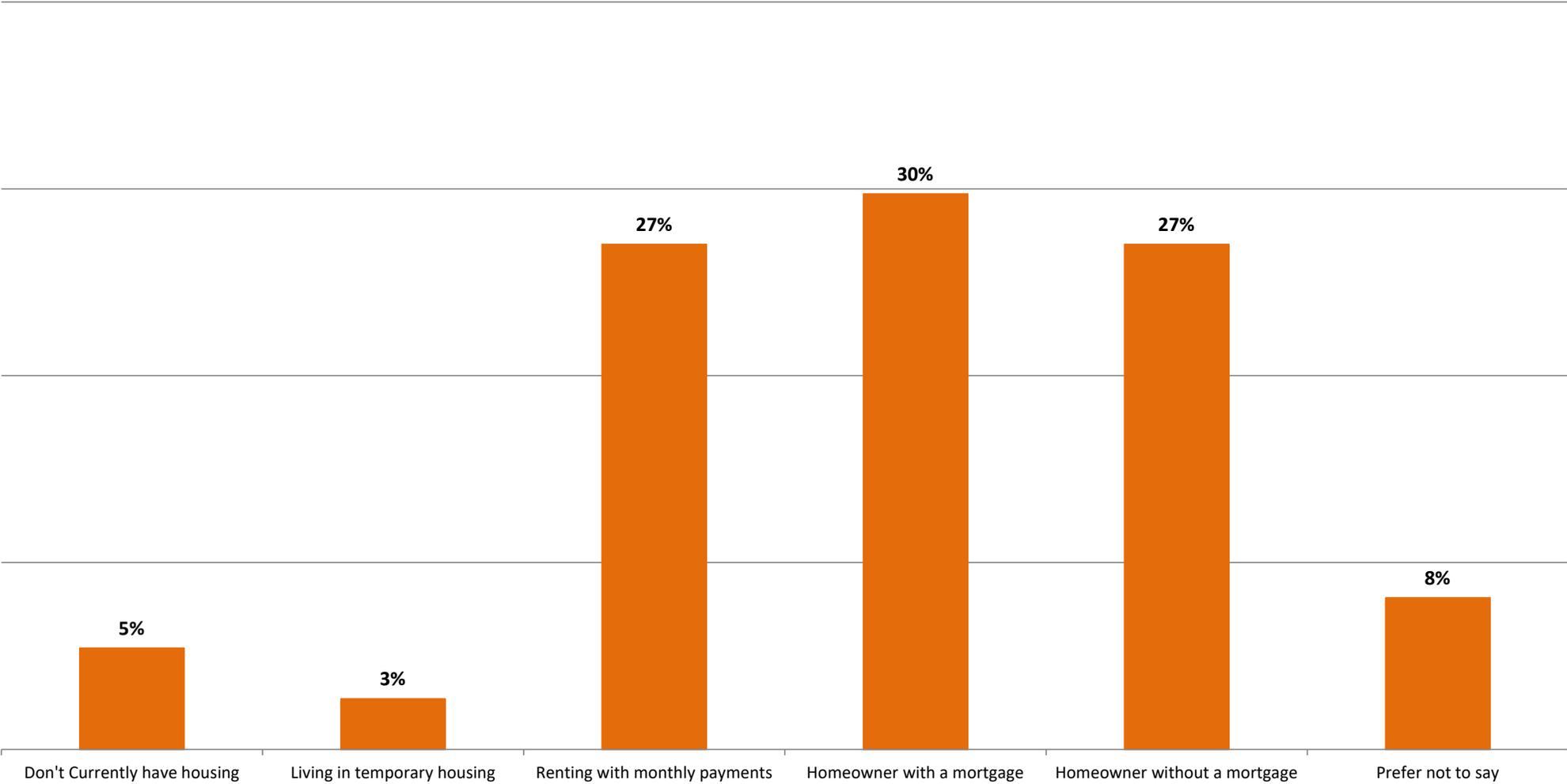
N=37

### Income of community input session participants



N=34

# Housing status of community input session participants



N = 37

# Hendricks County Resources

Geography	Asset Grouping	Contact Organization
Avon	Community, Cultural, and Economic Development	Avon & Washington Township Parks & Rec
Avon	Community, Cultural, and Economic Development	Avon Chamber of Commerce
Avon	Community, Cultural, and Economic Development	Avon Public Library
Brownsburg	Community, Cultural, and Economic Development	Brownsburg Chamber of Commerce
Brownsburg	Community, Cultural, and Economic Development	Brownsburg Parks & Rec
Brownsburg	Community, Cultural, and Economic Development	Brownsburg Public Library
Clayton	Community, Cultural, and Economic Development	Clayton Public Library
Countywide	Community, Cultural, and Economic Development	Hendricks County Alliance for Diversity
Countywide	Community, Cultural, and Economic Development	Hendricks County Community Foundation
Countywide	Community, Cultural, and Economic Development	Hendricks County Economic Development Partnership
Countywide	Community, Cultural, and Economic Development	Hendricks County Health Partnership
Countywide	Community, Cultural, and Economic Development	Hendricks County Parks & Rec
Countywide	Community, Cultural, and Economic Development	Hendricks County Pride
Danville	Community, Cultural, and Economic Development	Danville Chamber of Commerce
Danville	Community, Cultural, and Economic Development	Danville Parks & Rec
Danville	Community, Cultural, and Economic Development	Danville Public Library
Plainfield	Community, Cultural, and Economic Development	Guilford Township Parks & Rec
Plainfield	Community, Cultural, and Economic Development	MADE @ Plainfield
Plainfield	Community, Cultural, and Economic Development	Plainfield Chamber of Commerce
Plainfield	Community, Cultural, and Economic Development	Plainfield Public Library

# Geography Asset Grouping

# Contact Organization

Avon	Education	Avon Community School Corporation
Brownsburg	Education	Brownsburg Community School Corporation
Clayton	Education	Mill Creek Community School Corporation
Countywide	Education	Hendricks College Network
Countywide	Education	Hendricks County Phoenix Collaborative
Danville	Education	Danville Community School Corporation
Lizton	Education	Northwest Hendricks Community School Corporation
Pittsboro	Education	Northwest Hendricks Community School Corporation
Plainfield	Education	Plainfield Community School Corporation

Geography	Asset Grouping	Contact Organization
Countywide	Domestic Violence	Sheltering Wings (Danville office)
Danville	Domestic Violence	Sheltering Wings
Avon	Social Services	Hope Healthcare
Brownsburg	Social Services	Veteran's Administration Center - Brownsburg
Countywide	Social Services	Family Promise of Hendricks County (Plainfield & Brownsburg offices)
Countywide	Social Services	Hendricks County DCS
Countywide	Social Services	Hendricks County Health Department (Danville office)
Danville	Social Services	Sycamore Services
Plainfield	Social Services	Active Grace (Camp Camby)
Plainfield	Social Services	Community Action of Greater Indianapolis
Plainfield	Social Services	Family & Social Services Administration

Geography	Asset Grouping	Contact Organization
Avon	Justice and Law Enforcement	Avon Police Department
Avon	Justice and Law Enforcement	Avon Schools Police Department
Brownsburg	Justice and Law Enforcement	Brownsburg Police Department
Brownsburg	Justice and Law Enforcement	Brownsburg Schools Police Department
Countywide	Justice and Law Enforcement	Hendricks County crisis intervention training for officers
Countywide	Justice and Law Enforcement	Hendricks County Drug Court
Countywide	Justice and Law Enforcement	Hendricks County JDAI & YAP
Countywide	Justice and Law Enforcement	Hendricks County Sheriff's Office & Corrections/Probation
Danville	Justice and Law Enforcement	Danville Metropolitan Police Department
Danville	Justice and Law Enforcement	Danville Schools Police Department
Plainfield	Justice and Law Enforcement	Plainfield Police Department

Geography			Asset Grouping			Contact Organization		
Countywide			Mental Healthcare			Hendricks County Crisis Reponse Team		
Countywide			Mental Healthcare			Hendricks County FIMR Team		
Countywide			Mental Healthcare			Hendricks County Mental Health & Wellness Coalition		

Geography	Asset Grouping	Contact Organization
Avon	Mental Healthcare	Avon Christian Counseling Center
Avon	Mental Healthcare	Avon Counseling
Avon	Mental Healthcare	Balanced Life Holistic - Susan Soares
Avon	Mental Healthcare	Care to Change Counseling
Avon	Mental Healthcare	Christina Weaver Rosner
Avon	Mental Healthcare	Creekside Counseling
Avon	Mental Healthcare	Cummins Behavioral Health Services
Avon	Mental Healthcare	FHL Center for Healing
Avon	Mental Healthcare	Gateway Counseling
Avon	Mental Healthcare	Jason Warner
Avon	Mental Healthcare	Lelyne Joyner
Avon	Mental Healthcare	Life Enrichment Counseling
Avon	Mental Healthcare	Melissa Ketner
Avon	Mental Healthcare	Poonam Ishanpara
Avon	Mental Healthcare	Susie's Place (Forensic adolescent interviewing)
Avon	Mental Healthcare	William Andrews

Geography	Asset Grouping	Contact Organization
Brownsburg	Mental Healthcare	Aura Counseling & Wellness
Brownsburg	Mental Healthcare	Bethany Irvine
Brownsburg	Mental Healthcare	Bridge to Mental Wellness Counseling - Tammy Munoz
Brownsburg	Mental Healthcare	Brownsburg Wellness
Brownsburg	Mental Healthcare	Caring Associates Counseling Group
Brownsburg	Mental Healthcare	CCS Counseling and Psychiatric Associates
Brownsburg	Mental Healthcare	Collaborative Change
Brownsburg	Mental Healthcare	Emily Kitchen
Brownsburg	Mental Healthcare	Harper Rose Counseling
Brownsburg	Mental Healthcare	Heather Simmer
Brownsburg	Mental Healthcare	Jane Roell
Brownsburg	Mental Healthcare	Jennifer Braunecker
Brownsburg	Mental Healthcare	Kimberly Metro
Brownsburg	Mental Healthcare	Meaningful Day Services
Brownsburg	Mental Healthcare	Michelle Whitaker
Brownsburg	Mental Healthcare	New Strength Counseling
Brownsburg	Mental Healthcare	Rediscover Counseling
Brownsburg	Mental Healthcare	Reflections Christian Counseling
Brownsburg	Mental Healthcare	Vibrantly Live - Alyssa Johnson
Brownsburg	Mental Healthcare	Voyage Counseling

Geography	Asset Grouping	Contact Organization
Danville	Mental Healthcare	Brabant Counseling
Danville	Mental Healthcare	Hendricks Therapy
Danville	Mental Healthcare	Rooted Vitality

Geography	Asset Grouping	Contact Organization
Plainfield	Mental Healthcare	AB Link Counseling Services
Plainfield	Mental Healthcare	Amy Chenault
Plainfield	Mental Healthcare	Bloom Counseling Services
Plainfield	Mental Healthcare	Bryn Dungan
Plainfield	Mental Healthcare	Centered Counseling
Plainfield	Mental Healthcare	Counselworx
Plainfield	Mental Healthcare	Create for Growth
Plainfield	Mental Healthcare	Davi Stein-Kiley
Plainfield	Mental Healthcare	Deborah Lynn Harland
Plainfield	Mental Healthcare	Healing Connections Therapy
Plainfield	Mental Healthcare	Healing Indy
Plainfield	Mental Healthcare	Heather A Eberth-Teike
Plainfield	Mental Healthcare	Hendricks Therapy
Plainfield	Mental Healthcare	Kiersten Roath
Plainfield	Mental Healthcare	Laura Jay-Ballinger
Plainfield	Mental Healthcare	Laurel Hicks
Plainfield	Mental Healthcare	Liberation Counseling Services
Plainfield	Mental Healthcare	Michelle O'Mara
Plainfield	Mental Healthcare	Monica DuBina
Plainfield	Mental Healthcare	New Beginnings Therapy Solutions
Plainfield	Mental Healthcare	Providence Guidance Center
Plainfield	Mental Healthcare	Solution Focused Counseling & Consulting
Plainfield	Mental Healthcare	Strafford Institute of Family Therapy & Training
Plainfield	Mental Healthcare	Strides to Success

Geography	Asset Grouping	Contact Organization
Brownsburg	Mental Healthcare, Substance Use Care	The Willow Center
Plainfield	Mental Healthcare, Substance Use Care	Hamilton Center
Plainfield	Mental Healthcare, Substance Use Care	Hendricks Behavioral Hospital
Plainfield	Social Services	Firefly Children and Family Alliance
Avon	Substance Use Care	Dr. John Beerbower w/ American Health Network (MAT)
Avon	Substance Use Care	IU Health West Addiction Treatment & Recovery Center
Countywide	Substance Use Care	Hendricks County Substance Abuse Task Force
Plainfield	Substance Use Care	CleanSlate (MAT)
Plainfield	Substance Use Care	WayMaker Recovery Homes
Plainfield	Substance Use Care	WIN Recovery (MAT)
		Mental Health America of Hendricks County - Open Door
Avon	Support Groups	Social Club & Veterans Club
Avon	Support Groups	Parents of Addicted Loved Ones
Avon	Support Groups	Westside Wayout Club (AA Groups)
Brownsburg	Support Groups	Brianna's Hope
Danville	Support Groups	Hendricks County Senior Services, support groups
Danville	Support Groups	Hendricks Regional Health- multiple support groups
Plainfield	Support Groups	Refueling Hope support group

## **Appendix B: What Works Session Notes**

## **Q1a. Based on the indicators, what are you aware of or do you think makes these things go up (makes things worse)?**

### Isolation

- Isolation (6)
- Abandonment
- Lack of Attention/Being Ignored
- No sense of belonging
- Pandemic fallout and trauma/Isolation and stress (4)
- Loneliness

### Judgement/Stigma

- Feeling judged (3).
- Cultural Beliefs prohibiting care
- Making it a "them" problem instead of "us"
- Fear and shame-based youth education
- Discrimination shown towards addicts/addiction taboo (2)
- Sweeping the Issue under the rug

### Lack of Awareness

- Denial that it exists
- Lack of Knowledge
- Not knowing where to get help/resources (7)

### Access to resources

- Waiting lists for help
- Some agencies have tight eligibility
- Lack of programs/resources/services (6)
- Program requirements are impossible to meet
- Mental health services in healthcare are pushing pills and medications. So often a person needs more than a prescription. Plus, you have to wait 1-2 months to see a doctor.
- Funding for services
- Mental Health Care is too expensive
- Quality of help is based on income level
- Lack of government funding to help lower incomes
- Lack of Insurance
- Turning people away because of insurance
- Inmates state access to their medications are "too expensive"
- Poor mental health care in jail (inmates report need to choose between medication and hygiene supplies)
- Health and mental health workforce shortage

### Violence/Trauma

- Traumatic experiences as a child

- Domestic violence/abuse
- Trauma
- Negative Living Environments/born into the lifestyle (3)

#### Economic Burdens

- Economic insecurity and burden (4)
- Cost of living went up (5)
- Poverty (3)
- Employment (4)
- Income (2)
- Life Stressors (money, family, health, work, fatherless households)/work life balance (2)

#### Housing

- Lack of housing for felons
- No Homeless Shelters
- Lack of Housing
- Housing cost

#### Social/interpersonal Pressure

- “Celebrity” influence/social media/media (2)
- “Cool factor” of drinking
- Nothing to do for free recreation
- Being in the Wrong Place at the Wrong Time
- Generational/Familial Relationships (2)

#### Other

- Band-aid solutions
- Untreated Mental Illness
- Numbers of Dealers and Users in the area
- No communication with doctors
- No Public Transportation
- Depression
- Incorrect Medications
- Lack of EAP program
- No aid for single fathers
- Older adults report transitioning between insurance and Medicare is difficult
- Corporate leadership

## **Q1b. Based on the indicators, what are you aware of or do you think makes these things go down (makes things better)?**

### Social/interpersonal

- Resuming “normalcy” being able to leave the house
- Schools being open again/positive extracurricular and sports activities (2)
- Prosocial activity options
- More diverse community services and workplaces
- Anything that reduces isolation helps (all participants agreed with this statement).
- Realizing what is really important or what truly matters
- Sense of belonging/ownership to community
- Open conversations/access to social/peer support
- Access to public spaces (libraries/parks) to connect with nature and get community services/increased Free family fun activities (3)

### Peer and Family Support

- Talking with people who understand what I’m going through. My telehealth therapy was a waste of my insurance company’s money because the therapist wouldn’t guide me toward solutions. This support group (Improve Your Mood) does.
- Support systems
- Hendricks County Senior Services—people encouraged me to try out the support group and to reduce my isolation through activities.
- Churches with groups to help with social needs and grief
- More Support Meetings
- Community AA/NA/HA meetings/12-step community support groups/camaraderie (2)
- My family helps/Healthy family connections (2)
- Healthy relationships

### Education

- Education and skills-based education for youth
- True Preventative Education for the Community
- Real Education in school about dangers [of drugs]/Provide drug education in schools (2)
- Classes on money management
- Education
- Education about mental health and where to get help
- Educating leaders and public service workers

### Justice System

- Harsher penalties for dealers
- Not house dealers with users in facilities
- Police/firefighters and healthcare work well together with drug overdoses

### Awareness/Reducing Stigma

- Behavioral Health Awareness Programs (2)

- Knowledge that therapy is okay and normal
- Reducing the stigma, learning I'm not the only one/stigma beginning to decrease/more public awareness (2)
- More people talking about it now
- Community conversations around mental health (including Chamber of Commerce Awareness team, young groups and different populations)

#### Funding

- Better pay for providers
- More aid for middle class
- Affordable Psychiatric Meds
- Free resources

#### Professional Services and Resources

- Therapy and psychiatric consultation
- Continuity of Care
- Doctors who listen
- Individualized Care vs "one size fits all"
- Treatment programs that are doing the work
- Having more locations of agencies
- Family recovery
- We need more grief support and resources.
- Easy access to care
- Mental health facility
- Access to behavioral health hospital in Hendricks County
- Sober Living Houses
- Transitional Recovery Aftercare
- Addiction Rehabs
- Mental Health Rehabs

#### Other

- Increased pay to allow for saving
- Remove the politics
- Decrease availability of drugs
- Drug use hotline
- Stable income/job
- Safety/security
- Stable economy
- Equitable programming
- Access to health insurance

## **Q2. What things do you know about in Hendricks County that can improve the measures?**

### Social Supports

- The Senior Center (Improve Your Mood, social activities, and exercise classes).
- Open Classes (can be joined at any time)
- Foundational Living Classes
- Character/Etiquette Classes
- Computer Access and classes
- Church/school communities
- Open door community center and social club

### Mental Health Support Groups

- The Improve Your Mood support group was the only resource I knew about (she had tried therapy but found out about the support group from Paramedicine)
- Access to recovery hubs (peer groups)

### Addiction Support Groups

- Drug Classes
- Peer Recovery support
- Community support groups like the Westside Wayout Club (12-steps)

### Access to Professionals

- The Willow Center (2)
- Cummings
- Hamilton Center
- Hendricks Behavioral Hospital (3)
- Increase mental health treatment for accuracy
- Increased mental health only treatment
- Open availability to mental health and addiction treatment
- Mental health services
- Care coordinators following-up with patients discharged from hospitals for drug-related issues
- Facilitate partnerships for mental health needs
- Private counseling/mental health providers
- Youth Assistance Program

### In-Patient/living facilities

- Recovery Residences
- Homeless Shelters
- Assisted Living Facilities for MH persons
- Rehabs for Sober Living

### Communication/Awareness

- Awareness of current resources/resource guide (3)
- Listening to the voices of those in need

- Communicate with more than one group of people
- Public Education on Mental Health and Addictions
- Education on understanding and coping w/MH
- Better advertised support system in the community
- Raising awareness of community members of empathy around mental health

#### Prevention

- Stricter Medication Drug Laws
- Reduce drug accessibility
- Narcan Distribution
- Focus on drug use in rural communities

#### Affordability

- Sliding Scale Fees
- More Help for the “Have Nots”
- Affordable/Accessible Transportation
- Remove “pigeon-hole” funding

#### Justice

- Less incarceration, more rehabilitation
- Police/firefighters and healthcare work well together with drug overdoses

#### Education

- Education
- More education programs through Hendricks County Health Department

#### Other

- Increased Community Help
- Parks foundation/free events for families/aquatic center/parks access (2)
- CHMC- Mobile crisis; crisis stabilization

### **Q3. Is there something that could be developed in Hendricks County to make these measures better?**

#### Resource Center

- One stop case management/navigation service
- Resource Center/hub (2)
- A phone line for local referrals or at least a better network to share what services are available.
- The participant shared that she was a school psychologist in N. Carolina. In her County they had a County Mental Health Department that served as one-stop-shop, even operating like an emergency room for those in mental health crisis. They also helped those with substance abuse disorder.

#### Public Awareness

- Attempts at education, like what the NFL is doing.
- Include mental health awareness information in the local papers
- Fundraisers to assist with raising awareness
- Talk to vulnerable populations
- Awareness of available resources/increased publicity
- Community advocates
- Increased awareness that mental health issues don't stem from lack of inner-strength
- More advertisements to raise awareness of these issues in Hendricks County and how to access resources for those most affected

#### Access to Resources

- More classes than just AA
- Increase psychologists & therapists
- More mental health and Medication Assisted Therapy programs
- Treatment for PTSD, ADHD, Depression
- Detox Programs
- EAPs at all jobs
- More inpatient treatment centers
- Access in smaller towns (Smaller towns like Lebanon get forgotten)
- Proactive treatment instead of reactive
- Increase access to mental health services/more facilities to deal with patients (2)

#### Stigma

- Remove stigma for seeking help

#### Education

- Increase education at schools regarding drugs
- Increase education at churches regarding drugs
- More programs/education for people ages 18-36
- Better training of mental health providers to provide real interventions instead of just listening

### Housing

- Aid to homeless
- Low-income housing
- Sober Living

### Transportation

- Free, low-cost public transportation
- Scooters like in Indy
- Public Transportation
- Better Medicaid cab system

### Affordability

- More affordable options or financial assistance for treatment
- Community fundraisers
- Funding

### Social/Entertainment

- Sober events, sober festivals and community events
- “Normal-life” sober spaces like dry-bars and music venues to socialize

### Public Safety/Justice

- Red Zone drug/violent areas
- Increase police community outreach
- Community policing

### Parenting

- Parenting Classes/ Family development and support for parents – especially fathers (2)
- Lower cost daycare/childcare options
- Affordable, quality childcare

### Whole Mind/Body

- Meditation Facilities/Yoga Facilities (2)
- Spiritual Speakers/Classes

### Employment

- More employment opportunities
- Job fairs (in local parks with job openings throughout the county)

### Other

- Youth resources
- Food insecurity resources
- Running club for all levels
- Narcan vending machines
- Create mental health emergency plans in schools that are shares with students/athletes
- Focus on injuries and pain not turning into addiction with athletes
- Build upon what we have done

## **Q4. If you had a magic wand, what would you like to see to improve these measures?**

### Resources - Mental Health and Substance Use

- More rehabs built
- Real Diagnosis in Real time
- In-Patient Treatment Facility
- Halfway Houses
- More accessibility for treatment/more providers
- Funding for programs
- Higher pay for peer recovery assistance
- More health coverage for mobile crisis center

### Resources - Special Populations

- More Domestic Violence Shelters
- Resources for single fathers
- More veteran services
- Healthcare for people with disabilities
- Groups created to provide intervention in risk families to help stop generational destruction and family decay

### Affordability

- Grants, scholarships, loans, etc./successful treatment reimbursement
- Public healthcare/free high-quality treatment
- More funding for access for rural and low-income people

### Criminal Justice System

- Court orders to rehab instead of jail
- More Programs like Drug Court
- Law Enforcement Better educated
- Getting treatment in jail
- Mental Health Team Deploy with 911
- Feeling safe in jail
- Access to medication for inmates

### Awareness

- Increased awareness of available programs
- How those who notice potential issues can most effectively intervene
- Awareness of how to recognize pleas for assistance
- As much attention paid to mental health as other health issues
- More community involvement in health

### Education

- Mental health/drug addiction education in elementary schools
- Healthy Relationship Classes

- More skills-based/youth-lead education for young people experiencing trauma
- Ways to decompress from stress for all ages
- Education around pushing those in need of skills to impact their life
- Financial literacy
- Trades promotion and financial literacy in the school system

#### Stigma

- Eliminate the stigma
- Acknowledge the problem instead of taboo

#### Housing

- Housing opportunities
- Free public housing
- Rent goes down/more affordable housing (3)

#### Transportation

- New Cars and licenses for everyone :)
- Free UBER accounts

#### Other

- I would use that magic wand on myself and on others so that we could be happy.
- Extinguish Drugs
- Increased Diversity/equality for everyone (2)
- Community family fun events
- Incentivizing employers to be “second-chance” and provide benefits packages
- Have a county effort to reduce drug use
- Have a joint effort between Hendricks Regional Health and IU West for mental health education/resources
- Access to jobs
- Affordable childcare
- Access to community programming
- Provide a sense of safety and security in a world full of amenities
- Healthy families=healthy community
- Better Customer Service with insurance providers
- More funding for parks
- Churches would teach family values and provide support and training to families instead of providing entertainment